

SURREY EXECUTIVE COUNCIL

(NATIONAL HEALTH SERVICE)

YEAR 1962 - 1963

ANNUAL REPORT

on the Services administered by the Surrey Executive Council,

under the National Health Service Acts

and the

Accounts and Financial Statements

for the

YEAR ENDED 31st MARCH, 1963

R. O. JENKINS T.D.
Chairman of the Council

S. H. BENNETT O.B.E.
Clerk of the Council

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JUNE 1963

EXECUTIVE COUNCIL FOR THE COUNTY OF SURREY

YEAR 1962 - 63

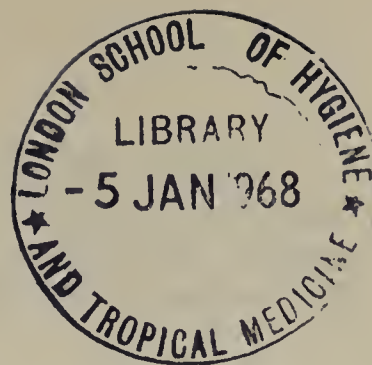
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FOREWORD

by

THE CHAIRMAN OF THE COUNCIL



It is my pleasure and privilege to present the Annual Report on the services administered by the Executive Council and the Accounts and Financial Statements for the year ended 31st March, 1963, and in doing so I would like to express appreciation of the comprehensive nature of the statistical information which has been prepared by the Clerk of the Council (Mr. S. H. Bennett) and the staff. This report can only give a broad picture of the work of the Council and can convey little idea of the vast amount of day to day administrative work being carried out by the staff.

During this, my first year as your Chairman, I have been able to meet many members of the staff and see for myself the work upon which they are engaged. I have been impressed by their efficiency and the interest displayed in the work in hand, and I want to take the opportunity that the preparation of this Foreword affords to thank the staff for their loyal service.

I do not propose to comment in detail on the services administered by the Council, since all relevant information is set out in the Report. The Council cannot, of course, exercise very much control over the overall cost of the various services, the terms and conditions of which are settled on a national basis. The rates of remuneration have, in fact, remained unaltered during the year ended 31st March, 1963, except in the case of the Dental Service, in which a new scale of fees was introduced on the 2nd July, 1962, which was said to have effected a 12 per cent reduction, as compared with the old scale. In addition, certain minor changes took place in the charges allowed for lenses and frames in the Ophthalmic Service, due to increased charges by the manufacturers.

It is in the field of administration expenses that it is possible to exercise some measure of control and, in this connection, I am satisfied that our administration costs are kept at as reasonable a level as is consistent with efficiency. There has, in fact, been some increase in administration costs during the past year, but even so they are only a fraction over $1\frac{1}{4}$ per cent of the total gross cost of the Services.

There has been a further slight reduction in the number of pharmacies in the area, due in the main, I think, to property redevelopment, which is such a feature in many of our towns at the present time. The shrinkage has so far taken place in districts where the number of pharmacies remaining is adequate, but, nevertheless, the Ministry of Health have been informed of the position and they have asked to be advised of trends in future.

The changes in local government organisation in the London area, which have been incorporated in the London Government Bill, have continued to exercise the minds of this Council and the time cannot be far distant when the Minister of Health will be entering into discussions with the Executive Councils concerned as to the future pattern of Executive Council administration in the London area. We have already communicated our views to the Minister and these may be summarised as follows:-

- (a) that any changes in Executive Council administration should be made so as to cause the minimum amount of disturbance to the present administration;

and

- (b) that the Surrey Executive Council should be responsible for the administration of the part of the County of Surrey to be included in the Greater London area, with the addition of Twickenham, as well as the area to remain in the new County of Surrey.

Apart from this, the Executive Council do not see any need to disturb the existing administration. It is perhaps of interest to note that in the course of the debate on this subject, which took place in the House of Commons on the 2nd April, 1963, on the Report Stage of the London Government Bill, the Joint Parliamentary Secretary, in resisting a proposal laying down the future pattern of Executive Councils in the London Area, stated that the proposal was unacceptable to the Government at the present time because a number of important interests still had to be consulted and it would not be satisfactory to lay down an inflexible pattern before consultation had been completed. The Joint Parliamentary Secretary added that what was best administratively for the Greater London area would determine the issue and that it might well be that a pattern not very dissimilar from that which obtains now would be the answer.

During the year, we have unfortunately lost one of our members by death, one resigned and three more changes took place at the end of the year, one as a result of resignation and two in respect of new appointments made in succession to members whose term of office had expired. This means a change of one fifth of the membership, no less than four being among the "lay" members. Besides recording our appreciation of the services of those who have ceased to be members, we have accorded a welcome to our new members and we would assure them that the Council and the Staff will wish to do everything they can to help them to acquire a full knowledge of the functions of the Executive Council within the framework of the National Health Service.

I wish to record my appreciation of the help I have received at all times from my Vice-Chairman, Mr. E. W. Gearey, the Chairmen, Vice Chairmen and Deputy Chairmen of the various Committees, who have devoted much valuable time to the work of the Committees. They have indeed made my duties as Chairman a pleasant and enjoyable experience.

I have already expressed my appreciation of the efficient and loyal services of the staff as a whole, but I feel I must express my special thanks to the Clerk for his unfailing courtesy and support throughout the year.

Finally, mention must be made of the Secretaries of the professional Committees and the members of the Committees themselves. In each case they have worked in harmony with the Executive Council and have always been ready to help to smooth out difficulties; in short, they have rendered a valuable contribution to the efficient administration of the General Medical, Dental, Pharmaceutical and Ophthalmic Services in this area.

R. O. JENKINS,

Chairman of the Council.

June 1963.

EXECUTIVE COUNCIL FOR THE COUNTY OF SURREY

National Health Service

Year 1962 - 1963

Members of the Council

CHAIRMAN

Mr. R. O. Jenkins, T.D.

VICE-CHAIRMAN

Mr. E. W. Gearey

APPOINTED BY
MINISTER OF HEALTH

1963 Mr. R. O. Jenkins, T.D.
1964 Mr. A. G. Tunnell, M.B.E.,
1964 Mrs. A. Woodgate, J.P.
1965 Mr. A. Burgess
1965 Mr. C. S. Petheram, C.B.E., M.C.

APPOINTED BY
LOCAL HEALTH AUTHORITY

1963 Mrs. L. A. Doel, M.B.E.
1963 Mrs. D. W. Sinclair
1963 Mrs. C. M. Waugh
1964 Mr. A. L. Kelly, O.B.E., J.P.
1964 Mrs. M. Walkden, O.B.E., J.P.
1964 Mr. B. A. G. Norman
1965 Mrs. K. C. S. Garrett
1965 Mr. J. T. Pyne, J.P.

APPOINTED BY
LOCAL MEDICAL COMMITTEE

1963 Dr. Ursula M. Dick
1963 Dr. D. V. G. Feltham
1964 Dr. A. R. Bowtell, M.B.E.,
1964 Dr. J. C. Cameron
1965 Dr. R. V. Goodliffe
1965 Dr. J. H. Lankester
1965 Dr. E. L. K. Sargent

APPOINTED BY
LOCAL DENTAL COMMITTEE

1963 Mr. J. A. Wilcox
1964 Mr. J. A. G. Starnes
1965 Mr. E. W. Gearey

APPOINTED BY
LOCAL PHARMACEUTICAL COMMITTEE

1963 Mr. T. Reid
1964 Mr. F. C. Wilson

NOTE: The year shown against each member's name
indicates the expiration of term of office
at the 31st March of that year.

Principal Officers of the Council

CLERK OF THE COUNCIL - Mr. S. H. Bennett, O.B.E.
DEPUTY CLERK - Mr. H. V. Wiggett
FINANCE OFFICER - Mr. S. R. Geeson
REGISTRAR - Mr. F. G. C. Willis

REPORT OF THE CLERK OF THE COUNCIL
FOR THE YEAR ENDED 31st MARCH, 1963

PART I

EXECUTIVE COUNCIL AND COMMITTEES

1. Membership of the Council and Committees

The members of the Council hold office for three years, approximately one-third of the members retiring each year. Those members whose terms of office expired on the 31st March, 1962, were re-appointed by the appropriate bodies.

Mr. A. W. Brown, a member appointed by the Local Health Authority, resigned from the Council because of other commitments. Mrs. K. C. S. Garrett of Walton-on-Thames was appointed in his place and a cordial welcome has been extended to her. The Council paid tribute to the work of Mr. Brown and placed on record their appreciation of his valuable services during the period of his membership of the Council. The Council also welcomed Mr. B. A. G. Norman, who had been appointed by the Local Health Authority to succeed the late Mr. P. MacHugh.

There have been three further changes in the membership of the Council at the end of the year under review. Dr. Ursula M. Dick and Mrs. L. A. Doel, M.B.E., ceased their membership on the expiration of their term of office and Mrs. M. Walkden, O.B.E., J.P., resigned because of other commitments. The council have thanked these members for their valuable contribution to the work of the Council during their membership.

2. Obituary

The Council suffered a great loss by the death of Mr. P. MacHugh on the 28th November, 1962. Mr. MacHugh had been a member of the Council since 1955, and at the time of his death was Chairman of the Dispensing, Finance and General Purposes and Hours of Service Committees, Vice-Chairman of the Establishment Committee, besides being a member of a number of Committees.

3. Meetings

During the year under review there have been the following meetings of the Council and Committees:-

				<u>Number of meetings</u>
Executive Council...	7
<u>Committees:-</u>				
Allocation	3
Dental Service	10
Dispensing	2
Establishment	4
Finance and General Purposes	7
General Services...	12
Hours of Service...	2
Joint Liaison	14
Medical Service	5
Ophthalmic Investigation	3
Ophthalmic Services	4
Pharmaceutical Service	-

The Payments Sub-Committee of the Finance and General Purposes Committee, and the Advisory, Premises and Accounts Sub-Committees of the Ophthalmic Services Committee met as and when required.

4. Constitution of Committees

The Establishment, Finance and General Purposes, and General Services Committees consist entirely of members of the Council. The Joint Liaison Committee consists of three persons appointed by the Council and three medical practitioners appointed by the Local Medical Committee, with an equal number of deputies. The membership of the remaining Committees consists of members of the Council and those appointed by the appropriate professional bodies.

PART II

GENERAL MEDICAL SERVICES

1. Medical List

- (a) At the 31st March, 1963, the names of 1165 medical practitioners were included in the Council's Medical List for the provision of general medical services. Of this number the names of 743 were included in the obstetric part of the list. Two practitioners were providing maternity medical services only, and 46 had restricted their lists to the residents and/or resident staff of certain schools, hospitals and other institutions. There were 45 medical practitioners acting as assistants and 16 trainee practitioners. During the year the Surrey Local Obstetric Committee approved the obstetric experience of 10 assistants and 1 trainee practitioner.

The names of 52 practitioners were added to the Medical List during the year. There were 31 withdrawals due to retirement and for other reasons, and 7 practitioners died.

Of the 1165 medical practitioners whose names were included in the Medical List at 31st March, 1963, 403 were resident in the areas of adjacent Executive Councils.

- (b) The following statement analyses in various age groups the principal practitioners, assistants and trainee practitioners:-

<u>Age Groups</u>	<u>Principals</u>		<u>Assistants</u>		<u>Trainee Medical Practitioners</u>		<u>TOTAL</u>
	<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>	
20 - 30	51	2	17	4	8	3	85
31 - 40	282	35	3	9	3	2	334
41 - 50	278	36	-	6	-	-	320
51 - 60	260	35	-	2	-	-	297
61 - 65	100	9	-	2	-	-	111
66 - 70	44	6	2	-	-	-	52
Over 70	25	2	-	--	-	-	27
<u>TOTALS</u>	1040	125	22	23	11	5	1226

2. Classification of Areas

The National Health Service (General Medical and Pharmaceutical Services) Regulations, require the Council once in every year or at such more frequent intervals as the Medical Practices Committee may require, to furnish the Committee with information to enable them to judge the adequacy of the medical service in the area of the Council. After discussions with the Executive Councils' Association (England) and the Association of Welsh Executive Councils, the Committee agreed in September 1955 only to ask for a full report on each Council area once in three years, subject to the right to call for a special report at any time if necessary. Quarterly returns of local changes are submitted to the Medical Practices Committee.

In January 1962 the Medical Practices Committee, after consultation with representatives of the British Medical Association and the Executive Councils' Association, decided that certain revised criteria for, and an additional grade of, classification of practice areas should be introduced.

The following is an outline of the criteria involved in the four classification grades:-

- (i) Designated Areas where an Initial Practice Allowance is available for new entrants into independent practice who are eligible to receive such payments.

Standards: Where the overspill over an average list of 2,500 may be sufficient to enable a doctor to develop a new practice or, if below this figure, where there are other considerations such as excessive outside commitments or new building which may have the same effect.

- (ii) Open Areas

Standards: Generally where lists average between 1,900 and 2,500. All applicants to enter practice in areas classified as Designated or Open may be assured that admission to the Medical List will be automatic on completion of their applications and that they may go ahead with all arrangements in anticipation of this.

- (iii) Intermediate Areas

Standards: Where lists average between 1,600 and 1,900 generally and where other commitments such as mileage, dispensing, etc. would not warrant the classification of Open.

Applicants to go on the Medical List to practise in such areas must be clearly warned that admission should not be taken for granted. It will depend on all the circumstances in the area at the time the application is considered and application may well result in a decision that the number of doctors is already adequate and, in the absence of any special considerations personal to the doctors or the area concerned, result therefore in refusal (subject of course to the statutory right of appeal).

- (iv) Restricted Areas

Standards: Where the Committee has already decided that the number of doctors on the Medical List is

adequate and where, in the absence of any special considerations which might cause the Committee to allow the application or the Minister on appeal to make an order having that effect, applications will normally meet refusal (again subject, of course, to the statutory right of appeal).

Classification of the Council's area as at the 31st March, 1963

<u>Designated:-</u> N I L		
<u>Open:-</u> <u>Boroughs</u> Beddington & Wallington Epsom & Ewell) Excl'd. Malden & Coombe) those in Surbiton) Worcester Sutton & Cheam) Pk.Postal) Area Kingston-upon-Thames Mitcham Reigate Richmond(Excl'd. Kew Ward) Wimbledon	<u>Urban Districts</u> Banstead Caterham & Warlingham Carshalton Chertsey Coulsdon & Purley Esher Farnham Frimley & Camberley Leatherhead Merton &) Excl'd. those Morden) parts in) Worcester Pk.) Postal Area Woking Walton & Weybridge	<u>Rural Districts</u> Dorking & Horley Godstone Guildford <u>Postal Area</u> Worcester Park
<u>Intermediate:-</u> <u>Boroughs</u> Barnes Guildford	<u>Urban Districts</u> Egham	<u>Rural Districts</u> Hambleton
<u>Restricted:-</u> <u>Boroughs</u> Godalming Kew Ward (Borough of Richmond)	<u>Urban Districts</u> Dorking Haslemere	<u>Rural Districts</u> Bagshot

Appendix II to this report contains a schedule showing the distribution of surgeries in relation to the Health Authority areas of the County.

3. Medical Practitioner Vacancies

On the withdrawal or removal of the name of a medical practitioner from the Medical List, the Council is required to inform the Medical Practices Committee and to furnish them with a report as to the need for filling the vacancy. The withdrawals from the Medical List during the past year have been dealt with in the following manner:-

Small lists - vacancies not declared	6
Partner(s) regarded as successor	25
Vacancies declared	3
Removal from List of medical practitioner having no patients in Surrey	4
<u>Total:</u>		<u>38</u>
		<u>==</u>

The Council announced 3 vacancies in the Medical Press. A note of the number of applications received is set out in the following schedule:-

<u>Vacancy No.</u>	<u>Reason for Vacancy</u>	<u>Approximate number of patients</u>	<u>Number of applications</u>
54	Resignation	1,974	21
55	"	1,700	9
56	"	1,196	11

4. Distribution of Patients

The following table shows the distribution of patients on the lists of doctors in the Council's area:-

<u>No. of doctors with:</u>	<u>1962/63</u>	<u>1961/62</u>
Up to 50 patients	301	287
51 " 100 "	72	70
101 " 500 "	157	160
501 " 750 "	47	44
751 " 1000 "	41	35
1001 " 1500 "	79	89
1501 " 2000 "	92	107
2001 " 2500 "	112	113
2501 " 3000 "	106	114
3001 " 3500 "	87	74
3501 " 4000 "	45	40
Over 4000 "	27	24
	*1166	1157

*Includes 1 list held in suspense pending transfer to the successor of the practice.

403 of the doctors on the Council's Medical List reside outside the Administrative County of Surrey, and of these 371 are in the groups of up to 500 patients. These groups include 47 doctors with lists limited to residents and/or resident staff of hospitals and institutions.

A large proportion of the doctors on the Council's Medical List are also on the Medical Lists of adjoining Executive Councils and have patients living in those areas. The information given in this paragraph relates only to those of their patients who live in Surrey.

5. Permitted maximum of patients on doctors' lists

The maximum number of patients a doctor is permitted to have on his list under the provisions of the Allocation Scheme is as follows:-

- | | | | |
|--|-----|-----|-------|
| (a) Single-handed practitioner | ... | ... | 3,500 |
| (b) Practitioners in partnership
(provided that the average
list of all partners does not
exceed that of a single-handed
practitioner) | ... | ... | 4,500 |
| (c) Allowance for employment of an
assistant full-time | ... | ... | 2,000 |

A tolerance of 50 over and above these maxima is allowed in respect of each principal practitioner. No tolerance is allowed in respect of an assistant.

An allowance may also be made in respect of the employment of a part-time assistant, provided the assistant is employed for at least half the time for which a full-time assistant would ordinarily be employed. During the year three applications were received for additional numbers for part-time assistants, of which one was allowed. Two were refused, but one of these was allowed later when the duties and salary of the assistant were increased by the applicant.

The Council is not ordinarily permitted to pay capitation fees for numbers in excess of the above maxima. However, the Council can make application to the Minister for such payment in exceptional circumstances, and the Minister's consent was obtained in one special case, for one quarter only, where a technical excess existed because two doctors (one formerly the assistant of the other), who had previously entered into partnership, had been unable to re-adjust their lists in the nine months allowed for the purpose by the Minister on a previous application.

At the end of the year under review, one partnership of two doctors was substantially in excess of its permitted maximum, and application for additional numbers by virtue of the employment of a part-time assistant by them having failed, they are at present seeking the services of a full-time assistant. Two other single-handed practitioners are very slightly in excess of their maxima.

6. Remuneration

(a) Capitation Fees and Loadings

During the year ended 31st March, 1963, the basic capitation fee payable in respect of each person included in a general practitioner's list at the beginning of each quarter and the loading fee payable in addition in respect of each person on a doctor's list within the range 401-1600 (501-1700 for doctors in partnership) were unchanged at 19/6d. and 14/- per annum respectively.

The sum of £42,389, being the Council's proportion of the Central Pool balance for the year ended 31st March, 1961, was distributed to doctors.

Applications for payments to be calculated on the basis of Notional Lists, i.e., a division of the aggregate number of persons on the partners' lists which is most financially advantageous to the partnership, have been received from 26 partnerships during the course of the year under review. The Committee's decisions were as follows:-

- | | | |
|-------|--|------------|
| (i) | Full approval | - 24 cases |
| (ii) | Approved, but subject to review in 12 months | - 1 case |
| (iii) | Not approved | - 1 case |

The Committee further reviewed the consent in the case of a partnership, where approval had previously been given for Notional List payments to be continued for 12 months. On this occasion, the Committee decided that payments on the basis of Notional Lists should be continued until further notice.

(b) Temporary Residents

There was an increase of 653 in the total number of claims paid, as compared with the previous year. The fee of 20/- (10/- for persons resident at a place which has been classified as a Convalescent Home or other Institution) remained unchanged.

(c) Emergency Treatment and Anaesthetics

The Distribution Scheme provides for a special payment in cases in which the services of a second practitioner are required for the purpose of administering a general anaesthetic otherwise than in connection with maternity medical services, and also in cases where treatment is provided in an emergency before the services of the patient's own doctor can be obtained.

All claims received by the Council are referred to the Local Medical Committee, who have the power, subject to appeal, to disallow payment of a claim. Generally speaking, these claims form a first charge on the sum available for distribution among doctors, but in certain cases the fee may be charged against the patient's own doctor.

Of the 79 claims for the provision of emergency treatment received during the year, 75 were allowed, 1 was disallowed, and 3 were under consideration at the date of this report.

A total of 85 anaesthetic claims were received all of which were passed for payment.

(d) Supplementary Annual Payments

At the 31st March, 1963, Supplementary Annual Payments were being made to two doctors between 60 and 70 years of age, and to four over 70.

The Central Committee decided not to approve the application, made on the grounds of hardship, for further continuance of the Allowance, in the case of a doctor who is under 60 years of age. Payment had been made up to the 31st March, 1962.

The Allowance, comprising a basic payment of £335 per annum, with an addition of 14/- for each patient above the 300th and up to the 400th and a reduction of 14/- for each patient over the 500th, remained unchanged during the year. It is normally payable to single-handed doctors with small lists who are over 60 years of age and have been in single-handed practice for the last 10 years in the practice from which the application is made.

(e) Group Practice Loans

The scheme provides for interest free loans to be made available to doctors who form group practices, and assistance in the form of these loans is normally available for the following purposes:-

- (i) The erection of a new building, either on land already owned by one or more members, or on land which may have to be acquired for the purpose, and for the acquisition of such land.
- (ii) The acquisition of an existing building and its conversion into surgery premises.
- (iii) The conversion of a building already owned by a member of the group.

Seven applications were received and considered by the Joint Liaison Committee of the Council and the Surrey Local Medical Committee during the year ended 31st March, 1963, and these were forwarded to the Group Practice Loans Committee for final consideration. The decisions were as follows:-

Supported by Council, not approved by Group Practice Loans Committee	1 application
Supported by Council, approved by Group Practice Loans Committee	1 "
Supported by Council, decision by Group Practice Loans Committee not received by 31st March, 1963	3 applications
Not supported by Council, decision of Group Practice Loans Committee not received by 31st March, 1963	2 "

Notice was received that the Group Practice Loans Committee had granted a loan in one case where a decision had not been received at the end of the last financial year.

At the 31st March, 1963, the position was as follows:-

	£.	s.	d.
Balance of loans o/s at 1.4.62	44,541.	5.	0
<u>Add</u>			
Loans made during the year 1962/3	...	18,950.	0. 0
		<u>63,491.</u>	<u>5. 0</u>
<u>Less</u>			
Repayments during the year 1962/3	...	4,024.	10. 0
		<u>£59,466.</u>	<u>15. 0</u>
Balance o/s at 31/3/63			

(f) Mileage

During the year under review, the sum of £12,096.0.0 was made available from the Mileage Fund and it was distributed as follows:-

	£.	s.	d.
(i) The Ordinary portion, being the main part, from which payments are made to doctors for normal rural travelling for distances in excess of two miles from the residence of the patient to the residence of the doctor:	...	11,636.	13. 0
(ii) The Reserve portion for travelling which presents exceptional difficulties:	...	356.	0. 0
(iii) Maternity Medical Services mileage:	...	103.	7. 0
		<u>£12,096.</u>	<u>0. 0</u>

The Council received notice on 16th August, 1962, that with effect from 1st July, 1963, the mileage schemes of Executive Councils in England and Wales will be replaced by the uniform scheme of rural practice payments and the preparatory work necessary to inaugurate the new scheme has been proceeding.

(g) Training Grants

During the year 21 applications for a grant for the training of a practitioner were approved. The maximum grant payable remained at £1,520, made up as follows:-

	£
Trainer's supervision grant	150
Trainee's salary and board and lodging (including the employer's share of the National Insurance contribution)	1,150
Maximum allowance if an extra car is used because of the employment of a trainee	220
	<u>£1,520</u>

(h) Maternity Medical Services

The scale of fees shown below, brought into effect on 1st January, 1961, has not been changed, except in respect of one or two items of partial care, but the Ministry of Health, after consultation with representatives of the profession, decided to make some changes in the wording of the definition of, and the terms of service for, Maternity Medical Services and in the system of fees.

	Doctors on the Obstetric List	Doctors not included in the Obstetric List
	£. s. d.	£. s. d.
Complete maternity medical services	12.12. 0	7. 7. 0
Period I - Ante-natal care	7. 7. 0	4. 5. 9
Period II - Confinement and Post-natal care	5. 5. 0	3. 7. 6

The scale also includes a full range of proportionate payments for the provision of partial care, emergency treatment, etc.

The changes in the system resulted in the introduction of a more simplified claim form E.C.24, and though supplies of the new form did not reach the Council until January 1963, it is already apparent that the work of pricing the large number of claims will be eased considerably when the new form comes into full use. The new form E.C.24 appears also to have been welcomed by doctors generally since it has reduced considerably the volume of clerical work involved in completing the claim forms.

The difficulties mentioned in last year's report, which arose from the controversial new Content of Services, in so far as it related to services to be given in the puerperium, have been eliminated by the introduction of the new arrangements, but inevitably, one or two problems have arisen, in particular the pricing of claims in respect of ante-natal treatment provided for

patients who make pre-arrangements for confinement in a "closed" hospital and, as a consequence, are required to attend a hospital clinic on one or more occasions during their pregnancy. All such claims had been regarded by the Council as "shared" cases and payment made at the rate of 15/- per visit, subject to a maximum of £5.5.0 (8/9d. and £3.1.3 for doctors not on obstetric list) whereas certain doctors claimed that they had provided the full range of ante-natal care and were, therefore, entitled to the full Period I fee of £7.7.0 (£4.5.9 for doctors not on obstetric list). Because there was a difference of opinion, the matter was referred to the Surrey Local Medical Committee for their observations; the Committee accepted the Council's view and the doctors concerned have been informed of the position. The Council also discussed with the Local Medical Committee the amount of the fee to be paid where a patient is confined in a General Practitioner Unit and it has been agreed that the full fee should be paid in such cases.

The following is a copy of the Return submitted to the Ministry of Health and it relates to the cases in respect of which a fee was paid during the year ended 31st December, 1962:-

Services for which fees were paid		Number of cases attended by:-		
		General Practitioner Obstetricians	Other General Practitioners	Total
1.	Complete service	9350	180	9530
2.	Full Period I only	940	85	1025
3.	Full Period I and part Period II	1930	54	1984
4.	Full Period II only	86	-	86
5.	Full Period II and part Period I	465	12	477
6.	Part Period I only	1545	84	1629
7.	Part Period II only	353	10	363
8.	Combination of partial care under Periods I and II	696	37	733
9.	Miscarriage	1010	50	1060
10.	Total	16375	512	16887

As a result of the revised Regulations it has been necessary to alter the form of Statistical Return required by the Ministry of Health. With effect from 1st January, 1963, the new Return calls for additional information about fees for anaesthetics and late bookings, but as the main analysis is restricted to 10% of the claims paid with a further analysis of 2% for one quarter in the year only, the overall volume of work appears to have been reduced as compared with the previous system, where a 100% analysis was required.

7. Deputising Arrangements

Regulations were made after consultation with the representatives of the profession, amending paragraph 8 of the Terms of Service of general medical practitioners which govern the arrangements which a doctor is required to make for a deputy to conduct his practice when he is prevented from giving personal treatment by reason of other professional duties, temporary absence from home or other reasonable cause.

In most areas doctors are accustomed to making arrangements with their partners, with other doctors in the neighbourhood, possibly through rota arrangements, or with doctors with small lists, for the care of their patients during short periods when they will not themselves be available, e.g. occasional or periodical night coverage or surgeries. They also contract directly with a locum tenens when one is required. The new Regulations will not affect these arrangements and the consent of the Executive Council will not be required to them. Standing arrangements must, however, continue to be notified to the Executive Council, who have also, as at present, to be notified of arrangements made for periods of absence longer than a week.

In a few areas there are companies, firms and persons, who in return for payment undertake to provide a deputising service to cover off-duty periods. As from 1st July, 1963, a practitioner who wishes to use, or continue to use, one of these deputising services will not be able to do so without the consent of the Executive Council.

8. Post-Graduate Courses

The Council was advised by the Ministry of Health that in the case of 48 medical practitioners appropriate grants had been authorised to enable them to attend post-graduate courses during the year.

9. Reports, Memoranda, etc. supplied to Medical Practitioners

During the year the Council has distributed to medical practitioners the following publications supplied by the Ministry of Health:-

Haemolytic Disease of the New Born

This booklet was prepared by the Standing Medical Advisory Committee and is a revised version of the memorandum originally issued in June 1958. The booklet stresses the importance of the role of the family doctor in assisting the prevention of loss of life from this disease, explaining the implications of the disease and advising parents about the probable outcome of future pregnancies.

Venereal Disease Service

This memorandum was prepared by the Standing Medical Advisory Committee and is one of their series on preventive and social aspects of medicine.

Admission to Hospital and Domiciliary Care Hospital Waiting Lists

This leaflet, which had also been issued to Local Authorities and Hospital Authorities, sets out the principles which should govern admission to hospital of certain types of patient and the arrangements which should be made for their care while waiting for admission and describes the action which should be taken by the general practitioner, Local Authority and Hospital Authority respectively. The leaflet also sets out suggestions on ways to improve the preparation and use of waiting lists.

Diagnosis of Smallpox

This paper on the diagnosis of smallpox, which was published in the British Journal of Clinical Practice in 1958, has been slightly revised and on the advice of the Standing Medical Advisory Committee has also been sent to hospital and public health staffs. The paper stresses the importance of early diagnosis of smallpox and sets out illustrated notes on diagnosis.

Smoking and Health

After consultation with representatives of the medical profession, the Ministry of Health prepared posters reminding the public of the risks to health of smoking and particularly cigarette smoking. Copies of the poster were distributed to general practitioners, who were asked to display them in their surgery or waiting room.

Active Immunisation against Infectious Disease

This booklet was prepared by the Standing Medical Advisory Committee and sets out, inter alia, prophylactics which are likely to be used routinely for active immunisation in childhood and suggests schedules of the sequence and timing of immunising procedures.

The Council also distributed to medical practitioners a report of a working party on the Welfare Needs of the Aged, prepared by the Surrey County Council.

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GENERAL MEDICAL SERVICES

Statement - Payments made to General Medical Practitioners
year ended 31st March, 1963

	Quarter ended:			
	30 June 1962	30 Sept. 1962	31 Dec. 1962	31 Mar. 1963
Number of persons on doctors' lists	1,471,037	1,474,281	1,478,488	1,483,261
Number on which capitation payments were based	1,470,018	1,474,530	1,478,369	1,483,029
Number of loadings	745,205	743,683	742,723	742,195
Number of Temporary Resident claims paid:-				
@ 20/-	8,759	8,927	10,151	6,733
@ 10/-	262	698	655	459

		£	£	£	£	<u>TOTAL</u> £
1.	<u>Payments (Quarterly)</u>					
	(a) <u>Capitation:</u>					
	@ 4s.10½d. per Qtr.	358,083	359,136	360,138	361,255	1,438,612
	(b) <u>Loadings:</u>					
	@ 3/6d. per Qtr.	130,388	130,145	129,976	129,884	520,393
	(c) <u>Temporary Residents</u>	8,890	9,276	10,478	6,963	35,607
	(d) <u>Emergency Treatment</u>	15	17	5	15	52
	(e) <u>Anaesthetics</u>	43	33	20	24	120
	(f) <u>Supplementary Annual Payments</u>	405	409	414	425	1,653
	(g) <u>Mileage</u>	2,973	2,966	3,077	3,080	12,096
	(h) <u>Maternity Medical Services</u>	36,718	44,788	41,549	37,344	160,399
2.	<u>Payments (other than Quarterly)</u>					
	(a) <u>Group Practice Loans issued</u>	18,950
	(b) <u>Training Grants</u>	32,692
	(c) <u>Central Pool -</u>					
	<u>Supplementary Payment:</u>	42,389
	<u>1960/61</u>					
	<u>Total (excluding Employer's share of Superannuation)</u>					£2,262,963

P O P U L A T I O N

Registrar-General's Estimated 1962.	1,491,000
Number of persons on Doctors' lists at 1st April, 1963.	1,485,946
Percentage of population on Doctors' lists.	99.661%

PART III

REGISTRATION

1. Persons on Doctors' Lists

At the end of the year under review, the number of persons on doctors' lists was 1,485,946, an increase of 14,909 during the year (compared with 18,460 last year). There were 218,700 additions to doctors' lists and 203,791 removals.

An indication of the movement in the registers which took place during the year in comparison with the two previous years, may be gained from the following table comparing major items dealt with during the past three years.

		<u>1962/63</u>	<u>1961/62</u>	<u>1960/61</u>
(a)	Number of persons removed from lists of doctors who resigned during the year.	50,897	74,987	42,663
(b)	Number of persons placed on lists of successors to resigned doctors' practices	50,557	72,255	40,815
(c)	Applications from persons registering with a doctor for the first time	43,553	44,428	44,119
(d)	Acceptances in respect of persons who moved into the County	65,089	65,941	66,668
(e)	Persons transferred from one doctor to another within the County	60,545	66,004	61,090
(f)	Notices from Central Register in respect of persons who moved out of the County	71,267	71,110	68,536
(g)	Notices in respect of persons who died, enlisted or went abroad	35,297	34,004	35,773
(h)	Claims passed for payment in respect of persons who received treatment from doctors as temporary residents	36,803	36,005	33,941

The number of doctors withdrawing from the Council's Medical List was the same as during the previous year, but the number of patients involved was about one-third less, as can be seen from items (a) and (b). This has had an effect upon the work under item (e), as there have been fewer people to take advantage of the opportunity afforded by the resignation of a doctor to make a change to someone other than the successor, and accounts for the reduction in the number of internal transfers compared with the previous year.

2. Inflation

The Registrar General's estimate of the population of the Administrative County for the 1st July, 1962, was 1,491,000, the increase over the previous year of 13,670, being the lowest for three years.

The number of persons on doctors' lists for the same date was 1,474,281 or 98.88% of the population. At the end of the year under review it was 99.66% of the same population figure. The corresponding percentages for the previous year were 98.58 and 99.57 respectively.

The rate of increase of both population and numbers on doctors' lists seems to be slowing, and the amount of the increases seems to be more nearly the same whereas in previous years the amount by which the number on doctors' lists increased greatly exceeded the increase in population.

During the year 1,043 names were removed from doctors' lists following enquiries regarding residents at schools and other institutions, and 2,440 as a result of enquiries in regard to immigrants.

Quite apart from the reduction in items (a) and (b) already mentioned in paragraph one, there has been a slight reduction in the number of registrations effected during the year.

Altogether, therefore, the trends seem to confirm the impression gained last year that the number on doctors' lists may stabilise at a figure slightly below that of the total estimated population.

3. Rural Practice Payments

Details of the new scheme for rural practice payments, which is to replace the existing mileage scheme on the 1st July, 1963, were issued during the year.

The object of the mileage scheme has always been to supplement the remuneration of rural doctors to compensate for the lack of opportunity to build lists of patients of the size of urban practices. It has never been a scheme to pay for doctor's travelling expenses.

The new rural practice payments scheme will have the same object, but the scheme has been drafted so that the money set aside for the purpose will be paid only to the doctors in rural areas, eliminating as far as possible urban doctors for whom it was never intended.

As with the old mileage scheme, the distribution of money will be based on the number of units allocated to doctors for patients living in specified rural areas, according to the distance involved. The main differences between the old and new schemes are:-

- (1) Central control of the areas which will attract payments, to ensure uniformity.
- (2) Calculation of distances to be from the doctor's main surgery instead of his residence.
- (3) The minimum distance for which claims may be made to be increased from 2 miles to 3.
- (4) The doctor must now have at least 10% of his patients in specified rural practice areas and living at distances of three miles or more before he becomes eligible for payment for these units.
- (5) Special units are allowed for necessary walking and other difficulties and special rates are provided for persons living in institutions, temporary residents, and those requiring emergency treatment.

Special cash payments are provided for maternity cases, and in respect of those patients whom an anaesthetist has to visit at the request of the patient's doctor.

It was clear from the outset that the registration records concerned with this matter would need to be drastically revised, and also that as a result of the new scheme the number of doctors who would be entitled to payment would be greatly reduced. As there seemed to be little point in revising mileage records for doctors who would not in any case be entitled to payment under the new arrangements, it was decided first to approach doctors in order to discover those who felt that they would not be entitled to such payment. As a result of this and other preliminary enquiries it was possible to eliminate a number of doctors from the scheme, and the number of doctors lists' which it was necessary to revise was thus reduced from 380 to about 150.

It was clear too that the number of patients in respect of whom these payments would be made would be fewer, and it was decided to create a separate register apart from the main Medical Register (in which mileage has until now been recorded) as a more convenient way of recording and accounting.

Of the 150 doctors in respect of whom these records were now to be kept, the records of about 50 were found to require complete revision, the information for which could only be obtained from the doctors themselves, who were supplied with cards to complete for each patient for whom they wished to claim. For the remaining doctors, the existing information, modified to conform with the requirements of the new scheme as far as possible, was copied on similar cards, carbon copies of which were sent to the doctors so that they might supplement and amend the information in whatever way they thought they were entitled to do under the scheme. The cards so completed form the basis of the new register of rural practice patients and doctors have been asked to complete similar cards for each new patient.

It was necessary to complete this work between the 16th August, 1962, when the E.C.L. was issued, and the 1st April, 1963, for which date the first figures were required by the Ministry of Health to be used to assess compensation payments due under the new scheme. In this time the Local Medical Committee has had to be consulted about the rural practice areas to be included in the scheme, representations made to the Minister about this, and revision carried out covering 70,000 patients and 380 doctors.

The first results, arrived at after the close of the year covered by this report, indicate that records under the scheme will cover about 25,000 patients and that 95 doctors would conform to the definition of eligibility under the scheme and actually qualify for payment under its terms.

4. Assignment of Persons to Practitioners

A person who is refused acceptance by a National Health Service doctor may make application to the Council to be assigned to a practitioner. It is then the duty of the Allocation Committee to assign the person to such practitioner as they think fit, having regard to the distance between the residence of the person and the various practitioners, and to such other circumstances as appear to them to be relevant. The Chairman of the Allocation Committee is authorised to carry out the power of assignment in cases in which action is necessary before a meeting can conveniently be held. During the year 29 persons were assigned to lists of practitioners in this way. Of these, 19 were members of five families.

In one case in which assignment had been carried out on several occasions previously, the Allocation Committee had so much difficulty in finding a doctor who was prepared to keep the patient on his list for any length of time that, with the co-operation of the Local Medical Committee, special arrangements were made to assign the patient to the local doctors in turn, each for a period of three months.

PART IV

PHARMACEUTICAL SERVICES

1. Pharmaceutical List

At the 31st March, 1963, the Council's Pharmaceutical List included the following pharmacies, etc. providing pharmaceutical services:-

	<u>1963</u>	<u>1962</u>
(a) Pharmacies	410	412
(b) Drug Stores	3	3
(c) Surgical Appliance Suppliers (not included at (a) or (b))	61	63

It will be noted that during the past year there has been a reduction of two pharmacies in the area. There was a reduction of nine in the previous year.

2. Hours of Service

The normal hours of business are from 9.00 a.m. to 6.00 p.m. with not more than seventy-five minutes closing for lunch, and on early closing days 9.00 a.m. to 1.00 p.m. Additional hours of service under the Council's scheme for securing that one or more places of business on the pharmaceutical list in each district are open at all reasonable times were provided by 356 pharmacies during the year. The duty rotas covered in the main additional service on weekdays, early closing days, Sundays and public holidays, but in the least populated districts it was not thought necessary to provide a full service of this nature. Broadly speaking, full service was given at 300 pharmacies on 79 rotas, and a modified service was provided at 56 pharmacies.

Where the additional hours of service on Sundays and public holidays vary in adjacent areas chemists in each district display a notice giving the times at which service is provided by the other chemists.

The hourly rates for after hours service are 10/-d. on weekdays, £1 on early closing days, Sundays and public holidays.

Payments made in respect of these services during the year ended 31st March, 1963, amounted to £19,293, and increase of £5,453 over the previous year.

3. Scheme for Testing Drugs and Appliances

A revision of the Drug Testing Scheme, whereby marginal cases are no longer referred for investigation by the Pharmaceutical Service Committee was brought into operation by the Minister on 1st April, 1961. The principal changes are:-

(i) Recording of Cases

The Chairman and pharmacist member may in certain circumstances decide not to refer to the Service Committee a case in which the departure from the prescription was not substantial, unless the chemist elects that it be so referred.

(ii) Disputed Analysis

Under the revised procedure, where a chemist disputes the official analysis, the report of his analyst and any report by the Referee will be submitted to the Chairman and pharmacist member to decide whether the case is to stand referred to the Service Committee.

(iii) Surgical Dressings

Certificates of Analysis of Surgical Dressings which show defects that could have occurred only during manufacture, and where the Drug Tariff requires the dressing to be supplied by the chemist sealed as received from the manufacturer or wholesaler, are excluded from reference to the Service Committee.

(iv) Proprietary Preparations

The scope of the scheme has been extended to include certain proprietary preparations.

Administration of Drug Testing Scheme

In accordance with the Scheme for testing drugs and appliances 199 samples of drugs and 43 samples of appliances were taken during the year. Two reports in respect of drugs (1%) and two in respect of appliances (4.6%) were referred to the Pharmaceutical Service Committee for investigation. Two reports in respect of drugs were recorded under paragraph 8 (b) or 10 (2) of the scheme and three reports in respect of appliances were pursued informally.

A summary of the samples taken under the scheme is given below:-

D r u g s				A p p l i a n c e s			
Dusting Powders	2	Mixtures	99	Absorb. Cotton Wool B.P.C.	12	Bandage Elastic Adhesive	2
Elixirs	2	Mouth Wash	1	Absorb. Cotton Wool (Hosp. Quality)	5	Cellulose Wadding	1
Emulsions	1	Ointments	2	Absorb. Gauze	4	Elastic Zinc. Oxide Plaster	2
Eye lotions	2	Pastes	1	Absorb. Lint	15	Zinc Oxide Plaster	1
Gargles	1	Penicillin Preparations	4	Bandage Crepe	1		
Linctuses	7	Powders	5				
Liniments	1	Tablets	26				
Lotions	1	Proprietary Preparations	41				
Lozenges	3						

4. Charges for Pharmaceutical Services

The National Health Service (Charges for Drugs and Appliances) Regulations 1961 provide that from 1st March 1961 the charge payable to a chemist in respect of each drug and each appliance supplied should be 2/-. Corresponding provisions were made in respect of charges payable to dispensing doctors.

The charges payable by patients in respect of elastic hosiery are set out below:-

Appliance					Charge
Elastic Ankle	5/- each
Elastic Knee	5/- "
Elastic Legging	5/- "
Elastic Thigh Piece	5/- "
Elastic Knee Legging	10/- "
Elastic Stocking	10/- "
Elastic Thigh Knee	10/- "
Elastic Knee Stocking	10/- "
Elastic Thigh Legging	10/- "
Elastic Thigh Stocking	10/- "

5. Comprehensive Handbook on Prescribing

A comprehensive Handbook on Prescribing has been issued to all general practitioners including assistants and trainee practitioners. The Handbook was prepared after consultation with the British Medical Association and brings together in a loose leaf form current editions of various documents which have been issued for the information of doctors in the Service. Each section is printed on different coloured paper and separated by colour dividing leaves to facilitate insertion of revisions and amendments. A pocket is also included to take a copy of the British National Formulary. Amendments of the Handbook have been made from time to time and copies of the amendments have been issued to practitioners so that these could be incorporated in the Handbook.

6. Prescriber's Journal

Copies of Prescriber's Journals are issued bi-monthly to doctors. The primary aim of the Journal is to provide doctors with early and reliable information about new pharmaceutical products so that they may appraise their value for use in general or hospital practice.

7. Drug Tariff

A new edition of the Drug Tariff (April 1962) was issued to chemists in June 1962. Payment for prescriptions received in the pricing offices during any calendar month beginning on the first of each month consist of:-

- (1) The total of the prices of the drugs, preparations, prescribed reagents or appliances, calculated in accordance with the provisions set out in the Drug Tariff, increased by a composite percentage rate of on-cost allowance calculated so as to represent, to the nearest one-tenth of one per cent where the number of prescriptions does not exceed 2,500 and to the nearest one-twentieth of one per cent in other cases, 25% for each prescription up to 500, 20% for each prescription from 501 to 750, and 12½% on the remainder.
- (2) The appropriate dispensing fees in accordance with the scale of fees set out in Part III of the Tariff, and an additional fee of 1/6d. for prescriptions marked "urgent".
- (3) A supplementary payment to chemist-contractors who are included in the Pharmaceutical List for the supply of drugs of 2.4d. per prescription or, in the case of oxygen cylinders, per cylinder, in addition to the appropriate dispensing fee.
- (4) The allowance for containers (except in respect of "bulk" prescriptions) as set out in Part VIII of the Tariff.

From 1st June, 1962, a pre-set insulin syringe was included in the list of appliances especially for use by blind patients.

8. Pricing of Prescriptions

The pricing of prescriptions is carried out by the Joint Pricing Committee for England operating through Pricing Bureaux in various parts of the country. The number of prescriptions submitted by chemists throughout the country totalled over one hundred and eighty-three millions, over five and a half millions emanating from the County of Surrey.

Statistics based on the prescriptions dispensed during the month of July 1962 were compiled by the Prescribing Investigation Bureau, and the Council advised doctors whose names were included in the Medical List of their prescribing costs to enable them to compare the cost of their prescribing with that of their colleagues in the area and the country as a whole.

9. Preparations alleged not to be Drugs

During the year the Pricing Bureaux referred to the Council for investigation certain cases in which it appeared to the Bureaux that the preparations prescribed might not have been drugs forming part of the Pharmaceutical Services under the Act. The decisions of the Local Medical Committee on cases referred to them are set out overleaf:-

Substance was a Drug - 6 Cases

Casilan	1	Rose Water Ointment	1
Complan	1	Tabs Acid Ascorbic	1
Pulv Lactocaline	1	Sebbix Shampoo	1

Substance was not a Drug - 10 Cases

Complan	9	Neko Soap	1
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In two cases concerning "Complan" the practitioner concerned has appealed against the decision of the Local Medical Committee that the preparation was not a drug in the circumstances in which it was prescribed. The matter has been referred by the Minister of Health to referees, whose decision is awaited.

10. Oxygen Therapy Equipment

Arising from consideration of claims from chemist contractors for compensation for financial loss in respect of Oxygen Therapy Equipment damaged whilst on loan to patients, representations have been made to the Ministry of Health that a cylinder stand should form part of the standard Oxygen Therapy Equipment.

11. Medical Practitioners - Drugs & Appliances

There were 45 dispensing doctors included in the Council's Medical List on 1st January, 1963, who were responsible for the supply of drugs and appliances to all or some of their patients. Three of these doctors have elected to submit their prescriptions for pricing and receive payment on the basis of the Drug Tariff; the remaining 42 were paid by way of the drug capitation fee which remained at 10/6d. per annum for each patient on the doctor's dispensing list, together with additional payment, over and above their drug capitation fees, for the supply of:

(i) specially expensive items included in the official list,

and

(ii) items not included in the Special List, where special sanction is given.

Pharmaceutical Services payments to dispensing doctors during the year under review amounted to £49,132.7.9, i.e. £3,965.17.7 more than in 1961/62. The sum of £8,017.14.0 was remitted to the Council by dispensing doctors in respect of prescription charges collected at the rate of 2/-d. per prescription and the following statement gives a detailed analysis for the past five years:-

<u>Year ended</u>	<u>Amount surrendered in respect of year</u>	<u>Number of Dispensing Patients</u>	<u>Rate of surrender per 100 patients</u>	
			<u>Drug Tariff basis</u>	<u>Capitation Fee basis</u>
	£. s. d			
31st March '59	3,391.12. 6	28,855	* 472	175
31st March '60	3,484. 0. 3	30,024	* 400	182
31st March '61	4,055. 8. 6	30,270	* 455	186
31st March '62	8,106. 8. 4	30,534	* 418	187
31st March '63	8,017.14. 0	29,497	* 420	179
* Excludes the figures relating to one doctor who is in a special category.				

12. Payments to Chemist and Appliance Contractors

(1) Statistical data issued by the Joint Pricing Committee for
England relating to the year January to December

<u>Items</u>	<u>1961</u>		<u>1962</u>	
	<u>Surrey</u>	<u>England</u>	<u>Surrey</u>	<u>England</u>
(i) Total number of prescriptions	5,807,763	191,111,594	5,616,378	183,445,953
(ii) Average total cost per prescription	103.34d	96.78d	111.74d	103.46d
(iii) Total cost	£2,500,651	£77,066,756	£2,614,831	£79,081,858
(iv) Average number of persons for whom doctors prescribe	1,424,510	41,081,472	1,443,510	41,629,497

(ii) Comparative Statement for the Administrative County of Surrey
for the financial years 1961/62 and 1962/63

<u>Month</u>	<u>Number of</u>		<u>Total cost</u> <u>1962/63</u>	<u>Patients' Charges</u>		<u>Month</u>	<u>Number of</u>		<u>Total Cost</u> <u>1961/62</u>	<u>Patients' Charges</u>	
	<u>Prescriptions</u>	<u>Forms</u>					<u>Prescriptions</u>	<u>Forms</u>			
<u>1962</u>			£	£		<u>1961</u>			£	£	
April	444,290	305,196	208,927	45,538		April	443,769	306,239	189,803	45,494	
May	480,797	331,714	222,912	49,661		May	478,861	331,250	206,626	49,300	
June	436,235	302,048	206,592	45,088		June	457,571	318,408	201,277	47,207	
July	428,321	297,204	204,678	44,226		July	427,532	297,813	192,215	44,084	
Aug.	398,334	274,962	192,017	41,113		Aug.	395,739	273,825	178,701	40,883	
Sept.	385,885	266,950	184,469	39,853		Sept.	411,790	285,122	184,197	42,426	
Oct.	477,666	329,177	221,943	49,156		Oct.	472,809	326,066	210,300	48,493	
Nov.	477,698	328,990	221,927	48,943		Nov.	464,599	319,226	206,348	47,545	
Dec.	468,245	315,922	221,407	47,746		Dec.	499,688	338,541	226,910	50,830	
<u>1963</u>						<u>1962</u>					
Jan.	524,583	352,881	246,485	53,029		Jan.	607,143	410,607	267,721	61,517	
Feb.	605,298	416,573	269,046	61,095		Feb.	467,446	321,747	212,632	47,619	
March	554,331	383,185	252,617	56,628		March	544,416	373,101	249,626	55,530	
TOTALS:	5,681,683	3,904,802	2,653,020	582,076		TOTALS:	5,671,363	3,901,945	2,526,356	580,928	

PART V

GENERAL DENTAL SERVICES

1. Dental List

- (a) At the 31st March, 1963, the following numbers of dental practitioners were included in the Council's Dental List for the provision of general dental services:-

			<u>1963</u>	<u>1962</u>
Principals	473	475
Assistants	77	77
			—	—
			550	552
			==	==

- (b) The statement below analyses in various age groups the practitioners whose names are included in the Council's Dental List:-

<u>Age Groups</u>	<u>Principals</u>		<u>Assistants</u>		<u>TOTAL</u>
	<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>	
20 - 30	50	5	40	6	101
31 - 40	154	10	14	5	183
41 - 50	122	9	4	1	136
51 - 60	68	-	1	1	70
61 - 65	23	-	2	-	25
66 - 70	20	-	3	-	23
Over 70	12	-	-	-	12
TOTAL:	449	24	64	13	550

2. Remuneration

The net cost of General Dental Services for the year ended 31st March, 1963, as shown in the following statement, was £2,190,651; £16,843 more than in the previous year. A new scale of fees for dental practitioners was, however, brought into operation with effect from the 2nd July, 1962, and it was estimated that its introduction would reduce the fees payable by 12%. The full effect of the change could not be assessed by the end of the year under review, because all estimates initiated before the 2nd July, 1962, had not been cleared by 31st March, 1963.

Statement of Payments for the years ended 31st March, 1962 and 1963

		<u>Year</u>		<u>Year</u>
		<u>1961/62</u>		<u>1962/63</u>
		£		£
1. <u>Scale Fees authorised</u>	April	217,871	April	220,229
<u>for payment by Dental</u>	May	208,953	May	215,563
<u>Estimates Board</u>	June	211,099	June	213,837
	July	197,913	July	206,707
	August	211,081	August	216,057
	September	182,615	September	166,656
	October	178,567	October	212,537
	November	218,419	November	198,981
	December	229,094	December	239,462
	January	201,473	January	190,540
	February	217,621	February	215,624
	March	206,880	March	208,010
		£2,481,586		
2. <u>Adjustments</u>	+	96	-	22
		£2,481,682		
3. <u>Deductions re Dental</u>	£		£	
<u>Service Cases, etc.</u>	440		682	
4. <u>Charges to patients</u>				
<u>under N.H.S. Acts</u>				
<u>1951/1952</u>	416,809		421,317	
		417,249		
5. <u>Payments to dental</u>				
<u>practitioners (gross)</u>		2,064,433		2,082,182
6. <u>Contributions - Reg.75</u>				
<u>Superannuation Regns.</u>		-		-
7. <u>Superannuation contri-</u>				
<u>butions (Council's share)</u>		109,375		108,469
8. <u>TOTAL COST OF GENERAL</u>				
<u>DENTAL SERVICES</u>		£2,173,808		£2,190,651

3. Replacement of Dental Appliances

Regulation 25 of the National Health Service (General Dental Services) Regulations places a duty upon the Council to consider applications for the replacement of dental appliances in cases in which the Dental Estimates Board have reason to think that the replacement may be necessitated by lack of care on the part of the patient. Such applications are considered by the General Services Committee who, after inviting the representations of the patient, determine whether the replacement is necessitated by lack of care on the part of the patient and whether the whole or a proportion of the cost of the replacement should be borne by the patient. If it subsequently appears that the payment of the sum so determined to be payable by the patient would involve undue hardship, the Council may make such contribution thereto as they may think fit.

The following statement shows details of decisions reached on applications considered during the years 1961/62 and 1962/63.

	Number of Cases	
	1961/62	1962/63
(a) There was no lack of care on the part of the patient	197	197
(b) Referred back to the Dental Estimates Board for consideration as normal replacement ^o	25	17
(c) There was lack of care and -		
(i) the patient should bear the full cost	196	243
(ii) the patient should bear part of the cost	45	47
(iii) the Council decided to make a contribution to the costs determined to be payable by the patient on grounds of hardship	<u>12</u>	<u>18</u>
	475	522
	<u> </u>	<u> </u>
	£. s.d	£. s. d
Total cost falling on patients	1,167.18.9	1,421.15. 9
Total cost falling on Exchequer	1,211. 0.9	1,293. 0. 5*
	<u>£2,378,19.6</u>	<u>£2,714.16. 2</u>

^o The Committee were of the opinion that these cases should not be considered under Regulation 25 but should be referred back to the Board for consideration as as a normal replacement, subject to payment by the patient of the usual statutory charge.

* This amount includes £87.13.9 contributions by the Council in cases under(c) (iii). The corresponding amount for the year 1961/62 was £79.15.6.

4. Discontinuance of treatment

The Council considered 31 applications by dental practitioners for authority to discontinue treatment they had commenced, and after seeking the observations of the patients concerned all of these applications were granted.

5. References to Dental Officer

During the year a number of enquiries were received from members of the public in regard to dentures provided under the General Dental Services, and in 17 cases it was necessary to have recourse to the Ministry of Health for a report of a dental officer. In the previous year the number of references of this kind was 19, and in the year 1960/61 17 cases were referred. In the majority of the cases referred for a report of a dental officer during the year under review, the difficulties experienced by the patients were resolved without the necessity for a formal investigation by the Dental Service Committee.

6. Charges for general dental services

Under the National Health Service Act 1951 which came into operation on the 21st May, 1951, all patients obtaining dentures under general dental services were required to pay the prescribed charge. A further regulation came into force on the 1st June, 1952, imposing a charge of up to £1 in respect of any course of dental treatment other than the provision of dentures.

The National Health Service (General Dental Services) Regulations 1961, which came into operation on the 16th May, 1961, amended the amounts patients are required to pay for dental appliances and provided for exemptions from charges for certain classes of patients.

These charges are as set out below:-

(a) Treatment

All patients accepted for treatment (other than the provision of dentures) are required to pay £1 or the full cost of the treatment if it is less than that amount. No charge is made to any person for an examination, the arrest of bleeding, or a domiciliary visit.

Excepted classes:-

No charge is made to persons who at the date of acceptance for treatment are children and young persons under the age of 21, expectant mothers, or mothers who have had a child during the preceding twelve months. In these cases the patients or the patients' guardians must sign a declaration in support of the claim for free treatment.

(b) Dentures, including bridges

	<u>Charge</u>
1, 2 or 3 teeth	£2. 5. 0
4 - 8 teeth	£2.10. 0
More than 8 teeth (maximum for one denture)	£2.15. 0
Additions to or relinings of dentures (including any other dental treatment)	£1. 0. 0
MAXIMUM per course for more than one denture or for more than one denture with any other treatment	£5. 0. 0

There is no charge for repairs to dentures or other dental appliances.

Excepted classes

No charge is made to persons who at the date of dental examinations are:-

*Children under 16 years or still attending school full time.

Expectant mothers.

Mothers who have had a child during the preceding twelve months.

A similar declaration as in (a) above is required.

*A school is defined in the Education Act 1944 as "an institution for providing primary or secondary education, or both primary and secondary education, being a school maintained by a Local Education Authority, an independent school, or a school in respect of which grants are made by the Minister (of Education) to the proprietor of the school".

7. Amendment Regulations

On 13th June, 1962, regulations were made providing for a new Second Schedule incorporating changes to the List of Items of Treatment which dental practitioners may provide under the National Health Service only with the prior approval of the Dental Estimates Board and a new Fifth Schedule setting out the fees payable to dental practitioners and the conditions with respect to materials used by them. These provisions applied in respect of courses of dental treatment under arrangements made on or after the 2nd July, 1962.

PART VI

SUPPLEMENTARY OPHTHALMIC SERVICES

1. The Ophthalmic Services Committee

(a) Constitution and term of office

The duties of the Executive Council in regard to Supplementary Ophthalmic Services are exercised on behalf of the Council by the Ophthalmic Services Committee constituted in accordance with the National Health Service (Executive Councils) Regulations. The term of office of members of the Committee is three years. The term of office of the Committee expired on the 31st March, 1963.

The Committee consists of sixteen members appointed as follows:

- (i) Eight members by the Council from among the members of the Council other than those appointed by the Local Medical Committee.
- (ii) One medical practitioner by the Council from among the members of the Council appointed by the Local Medical Committee.
- (iii) Three medical practitioners having the prescribed qualifications,
three ophthalmic opticians, and
one dispensing optician and one standing deputy
appointed respectively by such organisations as the Minister may recognise as composed of the professions concerned.

(b) Duties of the Committee

The duties of the Committee are to administer the Supplementary Ophthalmic Services, including the preparation and issue of lists of ophthalmic medical practitioners and ophthalmic and dispensing opticians taking part in the service in the area, the approval of the supply of glasses and of accounts for payment, and the consideration of applications in respect of the replacement and repair of glasses.

(c) Membership of the Committee on the 31st March, 1963

Appointed by the Executive Council:-

Dr. A. R. Bowtell	Mr. A. G. Tunnell (Vice-Chairman)
Mrs. L. A. Doel	Mr. F. C. Wilson
Mr. J. T. Pyne	Mrs. A. Woodgate (Chairman)
Mr. T. Reid	Vacancy
	Vacancy

Ophthalmic Medical Practitioners appointed by the British Medical Association and Faculty of Ophthalmologists:

Dr. C. F. Bowes
Mr. L. J. Green
Dr. J. H. Mellotte

Ophthalmic Opticians appointed by the
Joint Committee of Ophthalmic Opticians: Mr. R. A. Baxter
Mr. E. L. Ebbage
Vacancy

Dispensing Optician appointed by the
Association of Dispensing Opticians: Mr. A. W. Spon-Smith
Deputy: Mr. V. G. Lewis

(d) Changes in Membership

The two vacancies among the members appointed by the Executive Council were caused by the resignation of Mr. A. W. Brown and the death of Mr. P. MacHugh.

Mr. H. W. Gibson resigned the Chairmanship of the Local Optical Committee and his membership of the Ophthalmic Services Committee owing to ill health. Mr. Gibson had been in office since the inception of the National Health Service and the Committee have expressed their thanks and appreciation of his long and valuable services and the hope that the reduction in his commitments will result in an improvement in his health.

(e) Sub-Committees (appointments made annually by the Committee)

(i) Advisory Sub-Committee

This Sub-Committee deals with matters of day-to-day procedure within the regulations.

Membership:- Mr. E. L. Ebbage Mr. A. W. Spon-Smith
Dr. J. H. Mellotte Mrs. A. Woodgate

(ii) Hardship Sub-Committee

It is the duty of this Sub-Committee to consider applications for assistance towards the amount payable for the replacement and repair of glasses in cases where it is claimed that payment by the applicant would involve undue hardship.

Membership:- Mrs. L. A. Doel
Mr. A. G. Tunnell
Vacancy

(iii) Accounts Sub-Committee

This Sub-Committee is authorised to approve payment for sight tests and the supply, replacement and repair of glasses. The members are those members of the Ophthalmic Services Committee who are also members of the Finance and General Purposes Committee of the Council.

Membership:- Dr. A. R. Bowtell Mrs. A. Woodgate
Mr. A. G. Tunnell Vacancy
Mr. F. C. Wilson Vacancy

(iv) Premises Sub-Committee

This Sub-Committee was appointed to visit and report on the consulting, fitting and waiting rooms of ophthalmic medical practitioners and ophthalmic and dispensing opticians providing supplementary ophthalmic services in the area.

Membership:- Mrs. A. Woodgate
Mr. A. G. Tunnell

together with a professional member of the Committee representing the branch of the Service concerned.

2. The Ophthalmic Investigation Committee

Constitution and term of office

The Committee consists of a Chairman and ten other members appointed as follows:-

- (i) Four appointed by the Council from among the members of the Council other than those appointed by the Local Medical Committee.
- (ii) Two ophthalmic medical practitioners,
two ophthalmic opticians, and
two dispensing opticians,
appointed respectively by such organisations as the Minister may recognise as composed of the professions concerned.

The Chairman and one of the members appointed by the Council must not be members of the Ophthalmic Services Committee. For the purpose of investigations the Committee consists of a Chairman and eight members, that is, four members appointed by the Council, two members representing the branch of the Service involved (ophthalmic medical practitioner, ophthalmic optician or dispensing optician) and one member of each of the other two branches of the Supplementary Ophthalmic Services.

The term of office of the Ophthalmic Investigation Committee expired on the 31st March, 1963, when the membership was as follows:-

Mr. R. O. Jenkins (Chairman)) Appointed by the Committee.
Mr. A. L. Kelly (Deputy Chairman)	

Appointed by the Executive Council:-

<u>Principals</u>	<u>Deputies</u>
Mr. A. G. Tunnell	Mrs. L. A. Doel
Mrs. C. M. Waugh	Mr. T. Reid
Mr. F. C. Wilson	Mrs. D. W. Sinclair
Mrs. A. Woodgate	Vacancy

Appointed by the British Medical Association and Faculty of Ophthalmologists:-

<u>Principals</u>	<u>Deputy</u>
Mr. C. J. Longworth Blair	(To be appointed when the need arises)
Dr. J. H. Mellotte	

Appointed by the Joint Committee of Ophthalmic Opticians:-

<u>Principals</u>	<u>Deputy</u>
Mr. E. L. Ebbage	Mr. R. A. Baxter
Vacancy	

Appointed by the Association of Dispensing Opticians:-

<u>Principals</u>	<u>Deputy</u>
Mr. T. H. Collison	Mr. W. S. Stone
Mr. A. W. Spon-Smith	

3. The Ophthalmic List

The Ophthalmic List was revised and reprinted with effect from the 1st April, 1962, and copies of the new list were despatched to Crown post offices, public libraries and offices of the Ministry of Pensions and National Insurance in the Executive Council's area.

The number of practitioners whose names were included in the Ophthalmic List on the 31st March, 1963, was as follows:-

	(1963)	(1962)
<u>Ophthalmic Medical Practitioners</u>	83	81
<u>Ophthalmic Opticians</u> - Individuals	230	230
Premises	213	217
<u>Dispensing Opticians</u> - Individuals	74	73
Premises	53	51

4. Charges for the supply of glasses

In accordance with the National Health Service Acts, 1951 and 1961 persons using the Supplementary Ophthalmic Services, except children in certain circumstances, are required to pay the optician towards the cost of their glasses a sum of 12/6d for each single vision lens, or £1 for each bifocal lens, and the cost of any frame provided. An additional charge is payable if special lenses are supplied at the person's request.

Children under ten years of age may be supplied with children's standard glasses without charge, i.e. crown glass lenses in a nickel frame, but if any other National Health Service frame, or a privately supplied frame, is used the charges mentioned above are payable.

Children who have reached ten years of age, and either under sixteen or if aged sixteen or more, are in full-time attendance at a school within the meaning of the Education Act 1944, may also be supplied with children's standard glasses without charge. Alternatively, they may be supplied with lenses free of charge if these are fitted to any other National Health Service frame, but the cost of the frame is payable if a new one is provided. If a privately supplied frame is used the charge for lenses is payable.

The amount due to the optician from the Executive Council is the difference between the full cost of the glasses and the charges contributed by the patient, if any. The total amounts paid by the Executive Council and those paid by patients during the year under review, are given in the financial statement at the end of this section of the report.

5. Charges for the supply of glasses to children

In April and July 1962, the Ophthalmic Services Committee made representations to the Minister of Health that the Regulation, under which boys and girls aged sixteen years or more who are attending a school as defined in the Education Act 1944, are exempt from paying charges for National Health Service glasses, be extended so that boys and girls of the same age who are attending a school not covered by the definition, i.e. technical colleges and other establishments of further education, may also be entitled to exemption from the charges.

The Minister of Health stated that the essential reason for the adoption of the definition was to bring the conditions relating to exemption from National Health Service charges into line with the provisions in the Education Acts which lay a duty on Education Authorities for the free provision of medical and dental services. He went on to say that the definition might involve certain anomalies concerning pupils in technical colleges and other further education institutions, but on the other hand he believed that the adoption of any other definition would bring other and greater anomalies in its train. He offered no prospect of amendment to the Regulation concerned.

6. Statement of Fees and Charges

- (a) The Minister of Health revised the Statement with effect from the 1st May, 1962. The new Statement included increases in the prices of all frames and lenses, excluding curved spherical single-vision lenses of powers up to and including 6.00 dioptries, received from manufacturers on or after the effective date.

A nickel frame, and a cellulose acetate frame specially designed for children, were omitted from the new Statement and the Minister indicated that he had taken this action because there was little demand for the nickel frame and the special sides for the cellulose acetate frame were not being manufactured.

The range of colours for National Health Service plastic frames was specified as "light brown mottled, dark brown mottled, flesh, crystal, black and ice blue".

- (b) The Statement was amended with effect from the 1st September, 1962, to take account of increased prices varying from 1d to 7d for single vision lenses and laminated or toughened safety lenses. The new prices were applicable to those lenses received from manufacturers on or after the effective date.
- (c) As from the 1st January, 1963, the prices of two cellulose acetate frames and certain repairs to these frames, were increased. The revised prices represented increases of 8/-d for frames No. 514 and 7/7d for frames No. 515.
- (d) With effect from the 1st March, 1963, the Statement was amended to take account of an increase of 2d in the charge for spectacle cases and of amounts varying from 7d to 1/-d in the prices of a number of metal frames.

7. Permission for sight tests

As a means of preventing unnecessary sight tests, ophthalmic medical practitioners and ophthalmic opticians have been requested to ensure that a person's sight is not tested without the permission of the Ophthalmic Services Committee if it has been previously tested within the preceding twelve months, except where the need for a further test appears urgent, or where the person's general medical practitioner has been informed that the person should return for a further sight test within six months of the previous test.

During the period covered by this report the permission of the Ophthalmic Services Committee for a second sight test within a year was given in 3,263 cases.

8. The Prevention and Alleviation of Blindness

A revised booklet on the prevention and alleviation of blindness, prepared by the Standing Medical Advisory Committee for the Central Health Services Council and the Minister of Health, was sent to all general medical practitioners, ophthalmic medical practitioners and opticians in October 1962. The booklet mentioned the steady rise in the number of registered blind and partially sighted persons in England and Wales and commented on recent information which indicated that earlier and more effective treatment would prevent the occurrence, retard the progress, or alleviate the symptoms of some of the pathological conditions which endanger vision.

9. Uncollected glasses

Opticians have been requested to report to the Ophthalmic Services Committee all cases where glasses have been ordered but not collected after the person has been notified on two or three occasions that the glasses are ready. This request was made in order that a communication could be addressed to the person in an effort to effect collection of the glasses. The Committee have agreed that where all efforts fail to result in delivery of the spectacles the amount due from the Executive Council in respect of the lenses should be paid to the optician, and that he should return the frames to stock.

During the year 260 cases of uncollected glasses were reported to the Committee and a letter was addressed to each person concerned. In 126 cases the glasses were eventually collected, but in 95 cases the person failed to take delivery of the spectacles and the Executive Council's share of the cost of the lenses was paid to the optician. The remaining 39 cases were outstanding at the time this report was made.

10. Replacement and repair of glasses

In accordance with Regulation 15 of the National Health Service (Supplementary Ophthalmic Services) Regulations 1956, the whole or part of the cost of the replacement or repair of glasses is payable by the Executive Council unless the Ophthalmic Services Committee determine that the replacement or repair was necessitated by lack of care, in which case the charges are payable by the person. If, however, it appears to the Committee that payment by the person would involve undue hardship, the whole or part of the charges may be paid by the Executive Council.

Under Regulation 18, where approval has been given by the Local Education Authority for the replacement or repair of glasses for children, the Executive Council is entitled to claim the cost of the work from that Authority if it has been determined that there was lack of care on the part of the pupil.

The decisions reached on applications considered during the year, and the amount paid by the Executive Council are given in the statements shown at the end of this section of the report.

11. Inspection of premises

During the year under review the premises of one ophthalmic medical practitioner, two ophthalmic opticians, and one dispensing optician, were visited by the representatives of the Ophthalmic Services Committee appointed for the purpose.

12. Sight Tests, Supply and Repair of Glasses

Comparative statistics and financial data of sight tests, supply, and repair of glasses for the years ended the 31st March, 1962 and 1963 are given in the following statements:-

Comparative statement of sight tests, supply and repair of glasses,
paid for during the years ended 31st March, 1962, and 31st March, 1963

		<u>Year ended 31st March:-</u>	
		<u>1962</u>	<u>1963</u>
A.	<u>Sight Tests</u>		
	Sight tests paid for by Executive Council:-		
	1. Ophthalmic Medical Practitioners		
	(a) Under Local Education Authority arrangements	5,596	6,242
	(b) Others	64,497	62,320
	2. Ophthalmic Opticians	128,967	120,191
		199,060	188,753
	Sight tests given by a School Medical Officer (Fees not paid by Executive Council)	404	-
B.	<u>Glasses or lenses supplied</u>		
	Cases in which a payment was made by Executive Council	149,114	137,216
C.	<u>Prescriptions not approved</u>		
	1. Because applicant had glasses to the same prescription	239	395
	2. For other reasons, e.g. previous prescription not dispensed	24	43
		263	438
D.	<u>Replacement and repair of glasses</u>		
	1. Applications approved:-		
	(a) No personal carelessness	1,301	1,265
	(b) No personal carelessness (Local Education Authority arrangements)	2,422	2,683
	(c) No personal carelessness and hardship grounds	26	23
	(d) Hardship grounds only	16	7
	2. Applications not approved:-		
	(a) Personal carelessness	456	371
	(b) Payment claimed from Local Education Authority	493	435
		4,714	4,784

SUPPLEMENTARY OPHTHALMIC SERVICES ACCOUNT

Statement of payments made in respect of the Supplementary
Ophthalmic Services during the year ended 31st March, 1963

<u>Payments for the Year 1961/62</u>		<u>Payments for the Year 1962/63</u>
£		£
	1. <u>Sight Tests</u>	
	<u>Ophthalmic Medical Practitioners:</u>	
3,509	6,244 @ 12/6d.	3,903
74,150	62,341 @ £1.3.0.	71,692
<u>£77,659</u>	68.585	<u>£75,595</u>
	<u>Ophthalmic Opticians:</u>	
18,419	20,626 @ 18/-d.	18,563
86,801	106,030 @ 16/-d.	84,825
<u>£105,220</u>	126,656	<u>£103,388</u>
<u>£182,879</u>	195,241	<u>£178,983</u>
	2. <u>Supply and Repair of Glasses</u>	
	<u>Ophthalmic Opticians and Dispensing Opticians:</u>	
181,902	Dispensing Fees	174,721
212,454	Lenses, Frames and Cases	222,773
2,997	Replacements and Repairs (including refunds to patients)	3,157
<u>397,353</u>		<u>400,651</u>
	<u>Less:</u>	
	<u>Charges to patients under N.H.S. Acts 1951/1952:</u>	
	£	
	(a) Lenses 205,931	
	(b) Frames 28,496	
	<u>234,427</u>	
225,909		234,427
<u>£171,444</u>		<u>£166,224</u>
<u>£354,323</u>	<u>TOTAL FOR SUPPLEMENTARY OPHTHALMIC SERVICES</u>	<u>£345,207</u>

PART VII

NATIONAL HEALTH SERVICE (SERVICE COMMITTEES
AND TRIBUNAL) REGULATIONS

1. Service Committee Investigations

During the year under review the Service Committees of the Council investigated the following cases:-

(a) Dental Service Committee	13
(b) Medical Service Committee	6
(c) Ophthalmic Investigation Committee	2
(d) Pharmaceutical Service Committee	-
			<u>21</u>

A summary of the recommendations of the Council and the decisions of the Minister of Health thereon is given below:-

<u>Committee</u>	<u>Hearing</u>	<u>No</u> <u>Hearing</u>	<u>Minister's</u> <u>decision</u>	<u>Minister's</u> <u>decision</u> <u>outstanding</u> <u>at 31.3.63</u>
DENTAL	13	-	7	6

In regard to the cases in which the Minister's decision is outstanding, the Council has been advised by the Ministry of Health that on appeal by the patient in one case and the practitioner in another the Minister had decided that oral hearings should take place, and arrangements have been made for these to be held at the offices of the Council. In a further case the practitioner has appealed against the decision of the Council and the matter is still under consideration by the Minister. In all the cases in which the Minister's decision has been received the Minister accepted the Council's recommendation, in one case after an appeal by the practitioner.

<u>Committee</u>	<u>Hearing</u>	<u>No</u> <u>Hearing</u>	<u>Minister's</u> <u>decision</u>	<u>Minister's</u> <u>decision</u> <u>outstanding</u> <u>at 31. 3.63</u>
MEDICAL	3	3	4	2

In all the cases in which the Minister's decision has been received, the Minister accepted the Council's recommendation.

<u>Committee</u>	<u>Hearing</u>	<u>No</u> <u>Hearing</u>	<u>Minister's</u> <u>decision</u>	<u>Minister's</u> <u>decision</u> <u>outstanding</u> <u>at 31. 3.63</u>
OPHTHALMIC INVESTIGATION	2	-	1	1

In the case in which the decision of the Minister has been received, the Minister accepted the recommendation of the Council.

2. Appeals against decisions of the Dental Estimates Board

During the year the Council has on 13 occasions provided secretarial assistance in connection with the hearing by the Minister of Health of appeals against the decision of the Dental Estimates Board under Regulation 18 of the Service Committees and Tribunal Regulations. The hearings took place at Hospitals in various parts of the County and were held in the evening.

PART VIII

THE NATIONAL HEALTH SERVICE SUPERANNUATION SCHEME

The Scheme is compulsory and applies to:-

- (a) Whole time employees of the Executive Council over 18 years of age;
- (b) General medical and dental practitioners on the list of the Executive Council; and
- (c) Assistant medical and dental practitioners, except those assistant medical practitioners for whose employment the consent of the Executive Council is not required, provided that not less than 50% of the salary of the assistant is attributable to the care and treatment of Health Service patients.

The following statement gives details of staff and practitioners included in the National Health Service Superannuation Scheme, together with those not subject to the provisions of the Superannuation Regulations at the 31st March, 1963:-

<u>Category</u>	<u>Subject to Superannuation Regulations</u>			<u>Others</u>			<u>TOTAL</u>
	<u>Office Staff</u>	<u>Practitioners Principals</u>	<u>Practitioners Assistants</u>	<u>Over Age</u>	<u>Under 18</u>	<u>Opted out of Scheme</u>	
<u>Staff</u>	112	-	-	-	12	-	124
<u>Practitioners:</u>							
<u>Medical</u>	-	1078	61	39	-	48	1226
<u>Dental</u>	-	455	71	24	-	-	550
<u>TOTALS</u>	112	1533	132	63	12	48	1900

During the year applications for extension of pensionable age were received from 7 medical practitioners and 6 dental practitioners, and these were supported by the Council after consultation with the local Professional Committees.

The following table gives an analysis of the awards made by the Health Services Superannuation Division during the past year, together with a summary of those made in 1961/62:-

<u>Benefit</u>	<u>Medical</u>	<u>Dental</u>	<u>Staff</u>	<u>Total</u>	
	<u>Practitioners</u>	<u>Practitioners</u>		<u>1962/63</u>	<u>1961/62</u>
<u>Pension and Lump Sum Retiring Allowance</u>					
(i) <u>Incapacity</u>	10	1	-)	
(ii) <u>Retirement</u>)	
Between 60 and 65	9	5	3) 42	30
At 65 or over	8	4	2)	
<u>Death Gratuity</u>	5	3	-	8	8
<u>Short Service Gratuity</u>	-	-	-	-	-
<u>Retiring Allowance with the addition of the Capital Value of the Death Gratuity</u>	-	-	1	1	1
<u>Refund of contributions</u>	6	12	14	32	32
<u>TOTALS</u>	38	25	20	83	71

Several amendments have been made to the Regulations during the past 12 months, most important among them being:-

- (i) To increase to 35%, with effect from 1st April, 1962, the statutory allowance for practice expenses on all payments to a general medical practitioner formerly subject to an allowance of 30%. In the case of general dental practitioners the allowance continued at 52%.
- (ii) To increase the rates of pension and lump sum benefits payable to practitioners. In respect of remuneration paid on or after 1st September, 1962, the pension will be at the rate of $1\frac{3}{4}\%$ of total superannuable remuneration, i.e. the gross remuneration less the statutory allowance referred to in paragraph (i) above, instead of $1\frac{1}{2}\%$, and lump sum benefits at the rate of $1\frac{3}{4}\%$ or $5\frac{1}{4}\%$ instead of $1\frac{1}{2}\%$ or $4\frac{1}{2}\%$ respectively of total superannuable remuneration.
- (iii) To provide for the payment of superannuation benefits to officers retiring from the National Health Service on the grounds of redundancy or in the interests of the efficiency of the service if they have completed ten years' service, are at least 55 years old, and are not already entitled to benefit at that age.

The work of the Superannuation Section has continued to increase. The Finance Officer has again been able to offer assistance and advice on superannuation matters to practitioners and the expressions of thanks received have been greatly appreciated. Many interviews have been conducted and numerous enquiries answered by correspondence.

PART IX

G E N E R A L

1. Appointments to other bodies

Mr. F. C. Wilson was appointed by the Ministry of Health to be a member of the South West Metropolitan Regional Hospital Board as from the 1st April, 1960.

Dr. R. V. Goodliffe and Mr. A. G. Tunnell have continued to serve as the Council's representatives on the County Joint Liaison Committee comprising representatives of the Regional Hospital Board, the Hospital Management Committees, the County Health Committee and the Executive Council.

Drs. T. T. Hardy and J. H. Lankester serve as the Council's representatives on the Professional Advisory Committee on the Maternity Services in Surrey, with Drs. Ursula M. Dick and E. D. Ward as reserves; and Dr. J. D. Finnegan has been appointed the Council's representative on the Maternity Liaison Committee of the Mayday Hospital.

Mrs. A. Woodgate serves as the Council's representative on the Geriatric Sub-Committees of the Kingston and St. Helier Group Hospital Management Committees and the Surrey Old People's Welfare Standing Conference. Dr. Ursula M. Dick represents the Council on the Geriatric Sub-Committee of the Epsom Group Hospital Management Committee.

Mr. A. G. Tunnell is the Council's representative on the Management Side Panel from which Management Side members of the Whitley Council Administrative and Clerical Staffs Regional Appeals Committees are drawn.

Mr. A. L. Kelly is the Council's representative on the Addlestone, Byfleet, Chertsey, Walton and Weybridge Tuberculosis Care Committee. Mrs. D. W. Sinclair is the Council's representative on the Surrey Council of Social Service.

Mr. C. S. Petheram, Mrs. D. W. Sinclair and Mr. F. C. Wilson have been appointed to the Panel from which members of the Mental Health Review Tribunals would be drawn.

2. Executive Councils' Association (England)

The following are the elected representatives of the Executive Councils for the Southern Division of the Management Committee for the year 1962/63:-

Mr. R. L. Darch	-	Devon & Exeter
Brigadier W. Leslie	-	Cornwall
Mr. J. W. Gammon	-	Portsmouth
Ald. Mrs. M. Cutler	-	Southampton
Dr. P. W. F. McIlvenna	-	Reading.

The President of the Association is Dr. K. J. T. Wilson (Dorset), and the Vice-President Dr. J. E. Rusby (Leeds).

The objects of the Association are:-

- (i) To confer on matters relating to the National Health Service Act, 1946, and any amending Act, in order that Executive Councils may have the benefit of the practice and procedure of one another in matters of difficulty and doubt, as well as in the general administration of the National Health Service and the various Regulations, etc. issued by the Minister of Health, and to take such steps as may from time to time appear advisable to obtain amendments which experience may show to be desirable.
- (ii) To watch over and protect the general interest of Executive Councils as they may be affected:-
 - (a) By legislation of general application to Executive Councils and their areas;
 - (b) By the administration of the various Departments of the Government which may exercise jurisdiction over the work of the National Health Service;and
- (iii) To take action generally in relation to any subjects in which Executive Councils may be interested.

3. Joint Pricing Committee (England)

The Committee comprises twelve members elected by Executive Councils on a group basis and one member appointed by the London Executive Council. The election of members takes place annually, the election being conducted by the Executive Councils' Association in accordance with the National Health Service (Joint Pricing Committee for England) Order.

4. Royal Society of Health

The Minister of Health intimated that attendance of not more than two members of Executive Councils and the Clerk of the Council at the Congress of the Royal Society of Health could be regarded as "approved duty" under the National Health Service (Travelling Allowances, etc.) Regulations. The Chairman of the Council (Mr. R. O. Jenkins), Mr. T. Reid and the Clerk of the Council were appointed to attend Congress at Eastbourne on the 29th April to the 3rd May, 1963.

5. Staff

(a) Establishment

A statement showing the staff establishment, gradings, etc., at 31st March, 1963, is appended to this part of the report.

(b) Training

Under the scheme for post-entry training and further education the Council decided to continue the arrangement whereby a limited number of young people were permitted to attend Day Release Classes organised by the Surrey County Education Committee. A total of three juniors attended as follows:-

- | | |
|---|-----------------|
| (i) Shorthand and
Typing Course) | Two in Group II |
| (ii) General Certificate)
of Education Course) | One |

During the past year five members of the staff attended a Training School at Brighton under the auspices of the Executive Councils' Association Staff Training Committee. A further course has been arranged at Bristol University for officers in the Higher Clerical and Executive Officer I grades, and four members of the Council's staff have been selected to attend.

Introductory lectures on the various aspects of the work of Executive Councils have been given to 34 junior staff by the Senior Officers of the Council and arrangements are in hand to repeat this for new entrants during the coming year.

(c) Retirements

During the period covered by this report, six members of the staff, Mrs. D. G. Carpenter of the Post & Filing Section, Mrs. E. E. Milmer of the Administration Section, and Mrs. W. G. Head, Mrs. E. Johnson, Mrs. H. A. Richardson and Miss I. W. E. Scotcher of the Registration Department, retired from the service of the Council under the provisions of the National Health Service (Superannuation) Regulations, having completed 20, 16, 18, 10, 33 and 14 years service respectively with the Executive Council and former Insurance Committee.

(d) Visits, etc.

Mr. C. N. Rhodes and Mr. G. F. C. Clarke of the Organisation and Methods Branch of the Ministry of Health visited the offices in connection with the review of Executive Councils administrative procedures. Mr. Kavanagh and Mr. F. W. R. Andrews from the Northern Ireland General Health Services Board and Mr. Gillett and Mr. Bishop of the Treasury Organisation and Methods Branch visited the offices for the purpose of studying aspects of the work of an Executive Council.

An official invitation was received from the Kingston Group Hospital Management Committee and the Executive Council was represented by the Clerk of the Council at the opening of the Kingston Medical Centre.

Arrangements were made for a party of 12 school leavers to pay a visit to the Council's offices, but owing to a high incidence of sickness at the school at the time this had to be postponed.

The Clerk and Deputy Clerk have during the past year given talks to outside organisations on the National Health Service and the work of Executive Councils.

STAFF ESTABLISHMENT

as at 31st March, 1963

(1) ADMINISTRATIVE AND CLERICAL STAFF:-

GENERAL ADMINISTRATION

Clerk	1
Deputy Clerk	1
Executive Officer II	1
Executive Officer I	2
Higher Clerical	2
Personal Secretary Higher Clerical	1
Supervisor of Typists Scale II	1
Clerical	4
Shorthand Typists	5
Copy Typist	1
Clerical (R)	12
Machine Operator (Simple Duties) Extended Scale	1
Machine Operator (Simple Duties)...	1

(33)

FINANCE

Finance Officer	1
Senior Administrative Officer (Deputy Finance Officer)	1
Executive Officer I	1
Higher Clerical	5
Clerical	1
Clerical (R)	1
Machine Operator (Simple Duties)	1

(11)

OPHTHALMIC

Executive Officer II	1
Higher Clerical	1
Clerical	7
Clerical (R)	7

(16)

REGISTRATION

Senior Administrative Officer (Registrar)	1
Executive Officer II (Deputy Registrar)...	1
Executive Officer I	1
Higher Clerical	4
Clerical	18
Clerical (R)	39

(64)

Total Administrative and Clerical Staff
as at 31st March, 1963

124

Summary

Established	88
Unestablished	36
			<u>124</u>

(2) ANCILLARY STAFF:-

Storeman Handyman	1
Cleaners	5 (Part-time)
					<u>6</u>
					<u>=</u>

PART X

FINANCIAL STATEMENTS

The financial statements are set out
at Appendix I to this report

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PART XI

P E R S O N A L

I wish to acknowledge the loyal services of
the Council's chief officers and the members of the
staff.

My thanks are also due to the Secretaries of
the Local Dental, Medical, Optical and Pharmaceutical
Committees for their ready help and co-operation
throughout the year.

In conclusion, I wish to express my deep sense
of appreciation of the kindness and consideration shown
to me by the Chairman and members of the Council.

S. H. BENNETT,

Clerk of the Council.

June 1963.

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FINANCIAL STATEMENTS

The National Health Service Financial Regulations 1948 lay down financial procedure to be followed by Executive Councils in the exercise of their functions under Part IV of the National Health Service Act, 1946. The regulations further provide for the form of accounts to be kept by the Council, for the accounts to be furnished by them to the Minister, and for the audit of these accounts.

The accounts for the year ended 31st March, 1963, were submitted for approval and adoption by the Council at their meeting on the 8th May, 1963. A copy of the certified accounts has been received from the auditor, and a copy of his report to the Minister of Health will be submitted to the next meeting of the Council.

A copy of the accounts for the year ended 31st March, 1963, and financial statements relating thereto are set out, together with a copy of the Estimate for the year ending 31st March, 1964. The amounts shown have been taken to the nearest £.

The total net cost of the services administered by the Executive Council for the year ended 31st March, 1963, amounted to £7,142,911, which represents a charge of £4.15.10 per head of the estimated population of the County (1,491,000).

<u>Total net cost 1961/62</u>		<u>Total net cost 1962/63</u>	<u>Percentage of Total net cost</u>	<u>Net cost per head of population</u>
£		£	%	£. s. d.
86,251	<u>Administration</u>	88,858	1.24	1. 2
14,730	Salaries and Superannuation	17,213	.24	3
100,981	Other expenses	106,071	1.48	1. 5
2,364,857	<u>General Medical Services</u>	2,398,305	33.57	1.12. 2
2,020,584	<u>Pharmaceutical Services</u>	2,096,665	29.36	1. 8. 1
2,173,808	<u>General Dental Services</u>	2,190,651	30.68	1. 9 5
354,323	<u>Supplementary Ophthalmic Services</u>	345,207	4.83	4. 8
7,256	<u>Other Payments</u>	6,012	.08	1
£7,021,809		£7,142,911	100.00	£4.15.10

National Health Service Act, 1946EXECUTIVE COUNCIL FOR THE COUNTY OF SURREYStatement of Account for the Year ended 31st March, 1963Analysis of Superannuation Contributions

	<u>Employees' Share</u>	<u>Additional Cash Contributory Payments, etc.</u>	<u>Employer's Share</u>		<u>TOTAL</u>
	£	£	<u>Basic Contribution</u>	<u>Supplementary Contribution</u>	£
(a) Administrative Staff	4,132	-	5,624	1,126	10,882
(b) <u>Medical Practitioners</u>					
(i) General Medical Services	79,323	17	113,946	21,396	214,682
(ii) Pharmaceutical Services	1,431	-	1,930	362	3,723
(c) <u>Dental Practitioners</u>					
General Dental Services	66,408	4	91,231	17,238	174,881
<u>TOTALS:</u>	£151,294	£21	£212,731	£40,122	£404,168

EXECUTIVE COUNCIL FOR THE COUNTY OF SURREY

National Health Service Acts

STATEMENT OF ACCOUNT FOR THE YEAR ENDED 31st MARCH, 1963

<u>1961/62</u>	<u>RECEIPTS</u>	<u>1962/63</u>	<u>1961/62</u>	<u>PAYMENTS</u>	<u>1962/63</u>
£					£
6,600,050	1. Advances from Minister of Health	6,729,000		6. Administration Expenses:-	
	2. Superannuation Contributions retained:-		86,251	(a) Salaries and Wages	88,858
155,944	(a) Deducted from salaries, wages, remuneration of practitioners, etc.)	151,294	760	(b) Travelling and Subsistence expenses	872
261,548	(b) Council's share	252,853	13,970	(c) Other expenses	16,341
	3. Superannuation - Additional Cash Contributory Payments, etc.	21	2,364,857	7. General Medical Services	2,398,305
41	4. Other receipts:-		2,020,584	8. Pharmaceutical Services	2,096,665
	(a) Repayment of Group Practice Loans	4,025	2,173,808	9. General Dental Services	2,190,651
7,969	(b) Cash Payments by Doctors in respect of Prescription Charges Collected	8,103	354,323	10. Supplementary Ophthalmic Services	345,207
92	(c) Items supplied by Ministry of Works	23	437	11. Superannuation Contributions refunded	291
88	(d) Miscellaneous	108	6,819	12. Payments under Reg. 75 of the Superannuation Regulations	5,721
7,025,732		7,145,427	7,021,809		7,142,911
4,015	5. Balance brought forward 1st April:-	7,938	7,938	13. Balance carried forward 31st March:-	10,454
£7,029,747		£7,153,365	£7,029,747		£7,153,365

National Health Service Act 1946

EXECUTIVE COUNCIL FOR THE COUNTY OF SURREY

Statement of Account for the year ended 31st March, 1963

ANALYSIS OF PAYMENTS

<u>1961/62</u> £			<u>1962/63</u> £
	(A)	<u>ADMINISTRATION EXPENSES</u>	
77,145	1.	(a) Salaries and wages of Staff	79,555
-		(b) Overtime	9
		<u>Employer's Contributions:-</u>	
2,567		(c) National Insurance	2,544
6,539		(d) Superannuation	6,750
	2.	(a) Travelling and subsistence expenses of Staff:-	
71		Drug Testing	79
113		Other	151
		(b) Expenses of members of Council and Ophthalmic Services Committee:-	
494		Travelling and subsistence	561
82		Loss of remunerative time	81
	3.	(a) Other expenses:-	
-		Purchase, Construction, adaptation, etc. of newly acquired premises	-
112		Repair, maintenance, decoration, etc. of existing premises	328
		(Rent	-
		(Rates	1,248
2,393		(Heating, lighting, cleaning materials, etc.	1,381
595		Furniture and equipment	1,008
2,542		Stationery and printing	2,346
49		Advertising	45
7,195		Postage	8,250
164		Telephones	518
43		Cleaning Contracts	91
733		(b) Testing of drugs and appliances	884
20		(c) Subscription to Association of Executive Councils	20
124		(d) Other payments	222
£100,981		<u>TOTAL FOR ADMINISTRATION EXPENSES</u>	£106,071

<u>1961/62</u>			<u>1962/63</u>
£	(B)	<u>GENERAL MEDICAL SERVICES</u>	£
1,421,315	1.	Capitation payments	1,438,612
516,645	2.	Loadings	520,393
35,047	3.	Payments in respect of Temporary Residents	35,607
25	4.	Payments for Emergency Treatment	52
60	5.	Payments for administration of Anaesthetics	120
-	6.	Initial Practice Allowances	-
2,132	7.	Supplementary Annual Payments	1,654
6,041	8.	Group Practice Loans	18,950
12,022	9.	Mileage payments	12,096
-	10.	Inducement payments	-
149,061	11.	Payments for Maternity Medical Services	160,398
29,029	12.	Training Grants	32,692
49,056	13.	Central Pool balance payments for previous years	42,389
143,683	14.	Superannuation Contributions (Council's share)	135,342
741	15.	Additional Payments arising from Royal Commission Report	-
£2,364,857		<u>TOTAL FOR GENERAL MEDICAL SERVICES</u>	£2,398,305

	(C)	<u>PHARMACEUTICAL SERVICES</u>	
2,523,135	1.	Payments to pharmacists (excluding 2)	2,592,948
3	(a)	For the supply and dispensing of drugs and appliances	12
(-) 432	(b)	As compensation for loss of, or damage to, Oxygen Equipment	79
2,522,706	(c)	Special interim payments (less repayments)	2,593,039
563,060	<u>Less:</u>		
1,959,646	(d)	Deduction in respect of payments by patients under the N.H.S. Act, 1949	567,499
13,840	2.	Payments for rota services	2,025,540
45,167	3.	Payments to medical practitioners for the supply and dispensing of drugs and appliances (after deduction of charges under N.H.S. Act 1949 for elastic hosiery)	19,294
1,950	4.	Superannuation contributions (Council's share) relating to item 3	49,132
(-) 19	5.	Local Pharmaceutical Committee	2,292
£2,020,584		<u>TOTAL FOR PHARMACEUTICAL SERVICES</u>	407
			£2,096,665

<u>1961/62</u>		<u>1962/63</u>
£	(D) <u>GENERAL DENTAL SERVICES</u>	£
2,481,242	1. Payments due to Dental Practitioners (excluding 2 and charges recovered under N.H.S. Acts)	2,503,498
	<u>Less:</u> Charges to patients under:-	
	N.H.S. Act 1951/52	£ 420,145
416,809	Reg.25 Gen.Dental Services	
	Regs. 1954	<u>1,171</u>
2,064,433		421,316
-	2. Payments to Dental Practitioners practising at Health Centres (gross)	-
109,375	3. Superannuation contributions (Council's share)	108,469
£2,173,808	<u>TOTAL FOR GENERAL DENTAL SERVICES</u>	£2,190,651

	(E) <u>SUPPLEMENTARY OPHTHALMIC SERVICES</u>	
77,659	1. Payments to Medical Practitioners for testing of sight	75,595
105,220	2. Payments to Ophthalmic Opticians for testing of sight	103,388
181,902	3. Total dispensing fees as per Statement of Fees and Charges	174,721
212,454	4. Total cost of lenses, frames and cases (excluding dispensing fees and charges to patients other than those at (6) below)	222,773
2,997	5. Replacements and repairs (including refunds to patients)	3,157
580,232		579,634
	<u>Less:</u>	
	6. Charges to patients under the N.H.S. Act 1951:-	£
	(a) Lenses	205,931
225,909	(b) Frames	<u>28,496</u>
		234,427
£354,323	<u>TOTAL FOR SUPPLEMENTARY OPHTHALMIC SERVICES</u>	£345,207

	(F) <u>OTHER PAYMENTS</u>	
	Superannuation contributions refunded:-	
240	(a) Administrative Staff	126
29	(b) Medical Practitioners	4
167	(c) Dental Practitioners	161
	Payments under Reg.75 of the Superannuation Regns:-	
6,718	(a) General Medical Services	5,699
101	(b) Pharmaceutical Services	22
£7,255	<u>TOTAL OF OTHER PAYMENTS</u>	£6,012

National Health Service

EXECUTIVE COUNCIL FOR THE COUNTY OF SURREY

Estimate for the Year ending 31st March, 1964

Regulation 3 (3) of the National Health Service (Executive Councils and Dental Estimates Board) Financial Regulations, 1948, provides that the Council shall consider the annual and any supplementary estimates submitted to them by the Finance Committee and subject to such amendments therein, if any, as they may think fit to make, shall adopt such estimates as the estimates of the Council and shall transmit them to the Minister in the form approved by him.

Estimated Payments for the Year 1st April, 1963, to 31st March, 1964

S U M M A R Y

(including Superannuation Contributions)

	<u>Estimate</u> <u>1962-63</u>	<u>Estimate</u> <u>1963-64</u>	(+) <u>Increase</u> (-) <u>Decrease</u> <u>on 1962-63</u> <u>Estimate</u>
(A) <u>Administrative</u> <u>Expenses</u>	106,980	107,080	(+) 100
(B) <u>General Medical</u> <u>Services</u>	2,511,200	2,416,900	(-) 94,300
(C) <u>Pharmaceutical</u> <u>Services</u>	2,101,080	2,301,875	(+) 200,795
(D) <u>General Dental</u> <u>Services</u>	2,240,800	2,195,200	(-) 45,600
(E) <u>Supplementary</u> <u>Ophthalmic</u> <u>Services</u>	351,400	373,200	(+) 21,800
(F) <u>Payments under</u> <u>Reg. 75 of the</u> <u>Superannuation</u> <u>Regulations</u>	7,600	7,000	(-) 600
<u>TOTALS:-</u>	£7,319,060	£7,401,255	(+) £82,195

ESTIMATE - YEAR 1963/64

ANALYSIS OF ESTIMATED PAYMENTS

	Estimate 1962/63	Estimate 1963/64
(A) <u>ADMINISTRATION EXPENSES</u>	£	£
1. <u>Staff, salaries, etc.</u>		
(a) Salaries and Wages	80,000	80,000
(b) Overtime	-	-
(c) National Insurance contributions (Council's share)	3,000	2,700
(d) Superannuation (Council's share)	6,450	6,600
2. <u>Travelling and subsistence expenses</u>		
(a) Staff:-		
(1) Drug Testing	100	100
(ii) Other	160	160
(b) Expenses of members of Council and Ophthalmic Services Committee:-		
(1) Travelling and subsistence	500	600
(ii) Loss of remunerative time	100	150
3. <u>Office expenses</u>		
(a) Purchase, construction, adaptation, etc. of newly acquired premises	-	-
(b) Repairs, maintenance, etc.	750	750
(c) Rent, Rates, etc.:		
(1) Rent	-	-
(ii) Rates	(1,360
(iii) Heating, lighting, cleaning materials, etc.	(3,000	1,640
(d) Furniture and Equipment	1,000	1,000
(e) Stationery and Printing	2,500	2,500
(f) Advertising	50	50
(g) Postage	8,000	8,000
(h) Telephones	350	375
(i) Cleaning Contracts	50	100
4. <u>Other expenses</u>		
(a) Testing of drugs and appliances	850	850
(b) Subscription to Executive Councils' Association	20	20
(c) Miscellaneous	100	125
<u>TOTAL FOR ADMINISTRATION</u>	£106,980	£107,080

(B) <u>GENERAL MEDICAL SERVICES</u>		
1. Capitation payments, etc.	2,153,700	2,074,900
2. Group Practice Loans	10,000	6,000
3. Mileage Payments	10,000	10,000
4. Maternity Medical Services	150,000	160,000
5. Grants for Training General Practitioners	45,000	30,000
6. Council's share of superannuation contributions	142,500	136,000
<u>TOTAL FOR GENERAL MEDICAL SERVICES</u>	£2,511,200	£2,416,900

ANALYSIS OF ESTIMATED PAYMENTS

	Estimate 1962 / 63	Estimate 1963 / 64
(C) <u>PHARMACEUTICAL SERVICES</u>	£	£
1. Amounts due to Pharmacists (including charges to patients at 5 below)	2,650,000	2,800,000
2. Rota Service	12,500	19,500
3. Payments to Medical Practitioners for the supply of Drugs and Appliances	37,000	50,000
4. Council's share of Superannuation contributions	1,580	2,375
	2,701,080	2,871,875
5. <u>Less:</u> Charges to patients	600,000	570,000
<u>TOTAL FOR PHARMACEUTICAL SERVICES</u>	£2,101,080	£2,301,875

(D) <u>GENERAL DENTAL SERVICES</u>		
1. Fees of Dental Practitioners	2,550,000	2,500,000
2. <u>Less:</u> Charges to patients	420,000	415,000
	2,130,000	2,085,000
3. Council's share of superannuation contributions	110,800	110,200
<u>TOTAL FOR GENERAL DENTAL SERVICES</u>	£2,240,800	£2,195,200

(E) <u>SUPPLEMENTARY OPHTHALMIC SERVICES</u>		
1. Medical Practitioners - Sight Tests	83,400	80,000
2. Ophthalmic Opticians - Sight Tests	108,000	110,000
3. Dispensing Fees	190,000	180,000
4. Supply of Glasses	226,000	230,000
5. Repairs and Replacements	2,700	3,200
	610,100	603,200
6. <u>Less:</u> Charges to patients:-		
(1) Lenses	226,700	200,000
(ii) Frames	32,000	30,000
<u>TOTAL FOR SUPPLEMENTARY OPHTHALMIC SERVICES</u>	£351,400	£373,200

(F) <u>PAYMENTS UNDER REGULATION 75 OF THE SUPERANNUATION REGULATIONS</u>		
1. General Medical Services	7,500	6,890
2. Pharmaceutical Services	100	110
	7,600	7,000

<u>SUPERANNUATION CONTRIBUTIONS RETAINED</u>	<u>1963/64</u>
	£
(a) Employees' and Practitioners' shares included in items (A) to (F)	153,050
(b) Council's share included in items (A) to (F) above	255,175
<u>Total Superannuation Contributions:-</u>	<u>£408,225</u>
<u>ESTIMATED CASH RECEIPTS</u>	£
Cash payments by doctors in respect of prescription charges collected	8,000
Rents receivable	50
Items supplied by Ministry of Works	100
Miscellaneous	30
	<u>£8,180</u>

General Statistics of Local Authorities, etc. in the
County at the 31st March, 1963

<u>Local Authority</u>	<u>Area</u>	<u>Population</u>	<u>Practitioners and Pharmacists</u> <u>in the Service</u>		
	<u>in</u> <u>Acres</u>	<u>mid-</u> <u>1962</u>	<u>Doctors'</u> <u>Surgeries</u>	<u>Dentists'</u> <u>Surgeries</u>	<u>Pharmacies</u>
<u>BOROUGHS</u>					
Barnes	2,519	38,950	29	19	10
Beddington & Wallington	3,045	32,600	27	17	10
Epsom & Ewell	8,427	70,380	29	38	16
Godalming	2,393	16,940	10	10	7
Guildford	7,322	54,100	31	37	18
Kingston	1,408	35,990	22	25	16
Malden & Coombe	3,164	46,750	30	15	10
Mitcham	2,932	63,660	35	5	13
Reigate	10,255	54,680	35	40	17
Richmond	4,109	40,680	25	22	12
Surbiton	4,709	63,170	39	19	21
Sutton & Cheam	4,338	78,430	46	24	29
Wimbledon	3,212	56,850	45	34	18
<u>URBAN DISTRICTS</u>					
Banstead	12,821	41,370	30	11	14
Carshalton	3,346	56,380	24	11	12
Caterham & Warlingham	8,233	35,110	16	13	10
Chertsey	9,983	41,790	14	13	6
Coulsdon & Purley	11,143	74,260	46	32	20
Dorking	9,511	22,540	10	8	6
Egham	9,350	31,150	19	5	6
Esher	14,847	60,970	31	30	18
Farnham	9,039	27,520	15	7	7
Frimley & Camberley	7,768	31,650	10	8	8
Haslemere	5,751	12,990	20	17	8
Leatherhead	11,187	36,650	31	11	13
Merton & Morden	3,237	67,560	38	24	16
Walton & Weybridge	9,052	45,910	21	28	18
Woking	15,708	70,610	39	32	17
<u>RURAL DISTRICTS</u>					
Bagshot	16,083	16,610	9	3	6
Dorking & Horley	53,943	32,400	26	8	5
Godstone	52,507	40,940	26	16	7
Guildford	59,644	55,830	41	4	8
Hambleton	68,175	35,580	29	7	8
<u>TOTALS:</u>	449,161	1,451,000	898	593	410

